

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000160464

Entity Name: WOW ANESTHESIA SERVICES, LLC

Current Principal Place of Business:

100 WOODSTREAM COURT
MAITLAND, FL 32751

Current Mailing Address:

100 WOODSTREAM COURT
MAITLAND, FL 32751 US

FEI Number: 88-2777918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CIPPARONE & CIPPARONE, P.A.
1525 INTERNATIONAL PARKWAY
SUITE 1071
LAKE MARY, FL 32746 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HUNTER, CHAD
Address 100 WOODSTREAM COURT
City-State-Zip: MAITLAND FL 32751

Title AMBR
Name MACKEY, RACHEL
Address 100 WOODSTREAM COURT
City-State-Zip: MAITLAND FL 32751

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RACHEL MACKEY

AMBR

02/02/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date