

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000471720

Entity Name: VAK ANESTHESIA LLC

Current Principal Place of Business:

15771 CEDAR GROVE LN
WELLINGTON, FL 33414--631

Current Mailing Address:

15771 CEDAR GROVE LN
WELLINGTON, FL 33414--631 UN

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUCHCIAK, ANDRZEJ
15771 CEDAR GROVE LN
WELLINGTON, FL 33414 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 KUCHCIAK, ANDRZEJ
Address 15771 CEDAR GROVE LN
City-State-Zip: WELLINGTON FL 33414--631

Title AP
Name WIECZOREK KUCHCIAK, VIOLETTA
Address 15771 CEDAR GROVE LN
City-State-Zip: WELLINGTON FL 33414--631

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: ANDRZEJ KUCHCIAK

04/14/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date