

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Feb 21, 2014
Secretary of State
CC7307921009

Entity Name: NUETERRA HEALTHCARE SURGICAL SPECIALTY DIVISION,
LLC

Current Principal Place of Business:

ATTN: G. WOODY - 11221 ROE AVENUE
SUITE 320
LEAWOOD, KS 66211

Current Mailing Address:

ATTN: G. WOODY - 11221 ROE AVENUE
SUITE 320
LEAWOOD, KS 66211 US

FEI Number: 51-0514286

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 MGRM
Name NUETERRA HOLDINGS, LLC
Address 11221 ROE AVENUE, SUITE 320
City-State-Zip: LEAWOOD KS 66211

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: DANIEL J. SAALE

MGR

02/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date