2015 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000004899

Entity Name: KF ANESTHESIA, LLC

Current Principal Place of Business:

2470 DANIELLS BRIDGE RD, BLDG 100, STE 151

ATHENS, GA 30606

Current Mailing Address:

2470 DANIELLS BRIDGE RD, BLDG 100, STE 151 ATHENS, GA 30606

FEI Number: 38-3935238 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARACORP INCORPORATED 155 OFFICE PLAZA DRIVE 1ST FLOOR TALLAHASSEE, FL 32301 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: NINH HO 02/24/2015

Electronic Signature of Registered Agent

Date

FILED Feb 24, 2015

Secretary of State

CC8920476016

Authorized Person(s) Detail:

Title MGR

Name CARE PLUS MEDICAL PRACTICES,

HC

Address 2470 DANIELLS BRIDGE RD, BLDG

100, STE 151

City-State-Zip: ATHENS GA 30606

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: PAUL WEIR MANAGER 02/24/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date