2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 22, 2024
Secretary of State
9494173904CC

DOCUMENT# M14000004899

Entity Name: KF ANESTHESIA, LLC

Current Principal Place of Business:

3414 PEACHTREE ROAD N.E.
STE 340
ATLANTA, GA 30326

Current Mailing Address:

3414 PEACHTREE ROAD N.E.
STE 340
ATLANTA, GA 30326 US

FEI Number: 38-3935238

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

INCORP SERVICES, INC
3458 LAKESHORE DRIVE
TALLAHASSEE, FL 32312 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 04/22/2024

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	CARE PLUS MEDICAL PRACTICES, LLC
Address	1090 EXPERIMENT STATION ROAD, #529
City-State-Zip:	WATKINSVILLE GA 30677

Title	VP OPERATIONS, ANESTHESIA
Name	HAGLER, JAMI
Address	3414 PEACHTREE ROAD N.E. STE 340
City-State-Zip:	ATLANTA GA 30326

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: JAMI HAGLER VP OPERATIONS, ANESTHESIA 04/22/2024

Electronic Signature of Signing Authorized Person(s) Detail — Date