

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000004899

Entity Name: KF ANESTHESIA, LLC

Current Principal Place of Business:

1090 EXPERIMENT STATION RD, #529
WATKINSVILLE, GA 30677

Current Mailing Address:

1090 EXPERIMENT STATION ROAD, #529
WATKINSVILLE, GA 30677 US

FEI Number: 38-3935238

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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

03/23/2023

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

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: CASSIE SYME

CHIEF OPERATING
OFFICER

03/23/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date