

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000011796

**Entity Name:** VETERINARY EMERGENCY GROUP, LLC

**Current Principal Place of Business:**

44 SOUTH BROADWAY  
WHITE PLAINS, NY 10601

**Current Mailing Address:**

44 SOUTH BROADWAY  
WHITE PLAINS, NY 10601 US

**FEI Number: 82-2020171**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

BESSLER, DAVID  
2246 CONGRESS AVENUE  
BOYNTON BCH, FL 33426 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 M  
Name SCHF (M) ECI, L.P.  
Address 2800 SAND HILL ROAD  
City-State-Zip: MENLO PARK CA 94025

Title MGRM  
Name GLATTSTEIN, DAVID  
Address 6 OLD LYME ROAD  
City-State-Zip: SCARSDALE NY 10583

Title SVP FINANCE  
Name HOLLOWAY, BRETT  
Address 44 SOUTH BROADWAY  
City-State-Zip: WHITE PLAINS NY 10601

Title CFO  
Name JONATHAN, WALKER  
Address 44 SOUTH BROADWAY  
City-State-Zip: WHITE PLAINS NY 10601

*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: BRETT HOLLOWAY**

**SVP FINANCE**

**01/26/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date