



BA20242252390



STATE OF CALIFORNIA Office of the Secretary of State STATEMENT OF INFORMATION LIMITED LIABILITY COMPANY

California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448 For Office Use Only

-FILED-

File No.: BA20242252390 Date Filed: 12/23/2024

Signature	Date
Jasmine Grayson	12/23/2024
_	mation herein is true and correct and that I am authorized by
Labor Judgment No Manager or Member, as further defined by California Coutstanding final judgment issued by the Division of Labor appeal is pending, for the violation of any wage order or present the control of the	Standards Enforcement or a court of law, for which no
None Entered	
CEO Name	CEO Address
Opt-in Email Notifications Chief Executive Officer (CEO)	Yes, I opt-in to receive entity notifications via email.
Email Notifications	
Type of Business Type of Business	Management
Agent for Service of Process California Registered Corporate Agent (1505)	ANDERSON REGISTERED AGENTS Registered Corporate 1505 Agent
+ Consilient Interventional Healthcare Holdings, Inc.	1718 CAPITOL AVE. CHEYENNE, WY 82001
Manager or Member Name	Manager or Member Address
Manager(s) or Member(s)	
Street Address of California Office of LLC Street Address of California Office	None
Attention	LAS VEGAS, NV 89121
Mailing Address of LLC Mailing Address	3225 MCLEOD DR, SUITE 100
Street Address of Principal Office of LLC Principal Address	3225 MCLEOD DR, SUITE 100 LAS VEGAS, NV 89121
Formed In	CALIFORNIA
Entity No.	202465010359
Entity Details Limited Liability Company Name	Consilient Interventional Healthcare Administration, LLC