2014 LIMITED PARTNERSHIP REINSTATEMENT

FILED
Oct 17, 2014
Secretary of State

DOCUMENT# A93000001346

Entity Name: BAY AREA ENDOSCOPY AND SURGERY CENTER LIMITED PARTNERSHIP

Current Principal Place of Business:

5771 49TH STREET NORTH
ST. PETERSBURG, FL 33709

New Principal Place of Business:

Current Mailing Address:

5767 49TH STREET NORTH
ST. PETERSBURG, FL 33709

New Mailing Address:

5767 49TH ST NO
SUITE A
SAINT PETERSBURG, FL 33709

FEI Number: 59-3213374 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

KAMATH, JAYAPRAKASH K MD
5767 49TH STREET NORTH
ST. PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

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

GENERAL PARTNER INFORMATION:

Document #: P93000073689
Name: BAY AREA ENDOSCOPY ASSOCIATES, INC.
Address: 5771 49TH STREET NORTH
City-St-Zip: ST. PETERSBURG, FL 33709

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information indicated on this 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: JAYAPRAKASH KAMATH DR 10/17/2014

Electronic Signature of Signing General Partner Date