

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L07000088906
FILED 8:00 AM
August 29, 2007
Sec. Of State
jbryan

Article I

The name of the Limited Liability Company is:

LAKE CITY SURGERY CENTER, LLC

Article II

The street address of the principal office of the Limited Liability Company is:

404 NW HALL OF FAME DRIVE
LAKE CITY, FL. US 32055

The mailing address of the Limited Liability Company is:

300 WHEATRIDGE DRIVE
ROSWELL, GA. US 30075

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

KATHY LOVELACE
404 NW HALL OF FAME DRIVE
LAKE CITY, FL. 32055

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: KATHY LOVELACE

Article V

The name and address of managing members/managers are:

Title: MGRM
SPECIALTY HEALTH PARTNERS, LLC
300 WHEATRIDGE DRIVE
ROSWELL, GA. 30075 US

Title: MGRM
SARNO ROAD ASSOCIATES, LLC
120 NORTH POINTE BOULEVARD, SUITE 301
LANCASTER, PA. 17601 US

Article VI

The effective date for this Limited Liability Company shall be:

09/01/2007

Signature of member or an authorized representative of a member

Signature: BARBARA CHRISTOPHER

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