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SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

COVER LETTER

| Division of Corporations | |
|---|--|
| SUBJECT: SFM Surgery VII, LLC | |
| | ed Liability Company |
| The enclosed Articles of Organization and fee(s) are | submitted for filing. |
| Please return all correspondence concerning this mat | ter to the following: |
| Monica Wallace | |
| | Name of Person |
| McDermott Will & Emery L | LP |
| | Firm/Company |
| 227 W. Monroe, Suite 4400 |) |
| | Address |
| Chicago, IL 60606 | |
| Cit | y/State and Zip Code |
| mwallace@mwe.com | |
| E-mail address; (to be used | for future annual report notification) |
| For further information concerning this matter, please | e call: |
| Monica Wallace | _at (312) 984-7757 |
| Name of Person | Area Code & Daytime Telephone Number |
| Enclosed is a check for the following amount: | |
| \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy |
| | (additional copy is enclosed) |
| Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |

ARTICLES OF ORGANIZATION OF SFM SURGERY VII, LLC

The undersigned, being authorized to execute and file these Articles of Organization of SFM Surgery VII, LLC (the "Limited Liability Company"), hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is:

SFM Surgery VII, LLC

ARTICLE II - Address:

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

3343 State Road 7 Wellington, Florida 33449

ARTICLE III — Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV — Registered Agent:

The name and address of the registered agent for service of process in the state shall be:

Ravi Patel 3343 State Road 7 Wellington, Florida 33449

ARTICLE V — Management:

The Limited Liability Company will be a member-managed company and the member is South Florida Medicine, LLC.

ARTICLE VI — Effective Date:

These Articles of Organization shall be effective upon filing.

TILED IN 2: 00

SECRITARY OF STATE TALLEHASSEE, FLORIDA

IN WITNESS WHEREOF, the undersigned, as an Authorized Representative, has executed the foregoing Articles of Organization as of this 30 day of September, 2011.

SFM Surgery VII, LLC, a Florida limited

liability company

Name: RaviVatel

Title: Managing Director of South Florida Medicine, LLC, Managing Member of the

Limited Liability Company

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

SFM Surgery VII, LLC

Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent as provided for in Chapter 608, Florida Statutes.

Name: Rav Pate

Dated: September 30, 2011