

Florida Department of State

Division of Corporations
Public Access System

Electronic Filing Cover Sheet

m06000005519

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H06000245424 3)))



H060002454243ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5926

RECEIVED
06 OCT -5 PM 4:00
DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.**SMBIMS Orange City, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 OCT -5 AM 11:23

Electronic Filing Menu

Corporate Filing Menu

Help

<https://efile.sunbiz.org/scripts/efilcovr.exe>

10/5/2006

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. SMBIMS Orange City, LLC
(Name of Foreign Limited Liability Company)
2. Tennessee
(Jurisdiction under the law of which foreign limited liability company is organized)
3. applied for
(FEI number, if applicable)
4. 10/02/2006
(Date of Organization)
5. perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon filing of this application
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 40 Burton Hills Boulevard, Suite 500
Nashville, TN 37215
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here ☐
9. The name and usual business addresses of the managing members or managers are as follows:
Sole Member: SymbionARC Management Services, Inc., 40 Burton Hills Blvd., Suite 500, Nashville, TN 37215
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: healthcare management

Kenneth C. Mitchell
Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Kenneth C. Mitchell, Vice President of the sole member

Typed or printed name of signer

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 OCT -5 AM 11:23

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

SMBIMS Orange City, LLC

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System
(Name)

1200 South Pine Island Road

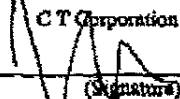
Florida Street Address (P.O. Box NOT ACCEPTABLE)

Plantation, Florida 33324

City/State/Zip

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2006 OCT -5 AM 11:23

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 as provided for in Chapter 608, Florida Statutes.

By: CT Corporation System
 (Signature) **Jennifer F. Aulman**
Assistant Secretary

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

Secretary of State
Division of Business Services
 312 Eighth Avenue North
 6th Floor, William R. Snodgrass Tower
 Nashville, Tennessee 37243

ISSUANCE DATE: 10/04/2006
 REQUEST NUMBER: 06277115
 TELEPHONE CONTACT: (615) 741-6488
 CHARTER/QUALIFICATION DATE: 10/02/2008
 STATUS: ACTIVE
 CORPORATE EXPIRATION DATE: PERPETUAL
 CONTROL NUMBER: 0530980
 JURISDICTION: TENNESSEE

TO:
 WALLER LANSDEN DORTCH & DAVIS
 AIMEE W. FUDUA
 511 UNION STREET
 NASHVILLE, TN 37219

REQUESTED BY:
 WALLER LANSDEN DORTCH & DAVIS
 AIMEE W. FUDUA
 511 UNION STREET
 NASHVILLE, TN 37219

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
 "SMBIMS ORANGE CITY, LLC"

A LIMITED LIABILITY COMPANY DULY FORMED UNDER THE LAW OF THIS STATE WITH DATE OF
 FORMATION AND DURATION AS GIVEN ABOVE;
 THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
 EXISTENCE OF THE LIMITED LIABILITY COMPANY HAVE BEEN PAID;
 THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
 THAT ARTICLES OF TERMINATION OF THE EXISTENCE HAVE NOT BEEN FILED.

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATE AFFAIRS
 2006 OCT -5 AM 11:23

FOR: REQUEST FOR CERTIFICATE

ON DATE: 10/04/06

FROM:
 WALLER LANSDEN DORTCH & DAVIS (511 UNION
 511 UNION ST/#2700
 PO BOX 198966
 NASHVILLE, TN 37219-8966

RECEIVED:	FEES	
	\$20.00	\$0.00
TOTAL PAYMENT RECEIVED:		\$20.00

RECEIPT NUMBER: 00004035755
 ACCOUNT NUMBER: 00000832



58-4175

Riley C Darnell
 RILEY C. DARNELL
 SECRETARY OF STATE