2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 25, 2018
Secretary of State
CC0247321848

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Entity Name: NOVAMED SURGERY CENTER OF ORLANDO, LLC

Current Principal Place of Business:

801 NORTH ORANGE AVENUE
ORLANDO, FL 32801

Current Mailing Address:

310 SEVEN SPRINGS WAY
SUITE 500
BRENTWOOD, TN 37027 US

FEI Number: 52-2441418

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US

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: AMY S. ZEIGLER 01/25/2018

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGER
Name	NOVAMED ACQUSITION COMPANY, INC.
Address	310 SEVEN SPRINGS WAY SUITE 500
City-State-Zip:	BRENTWOOD TN 37027

I hereby certify that the information indicated on this report or supplemental 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER BALDOCK AUTHORIZED PERSON 01/25/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date