10001456 Phone # City/State/Zip Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): Clinical Services (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) Certified Copy Pick up time Walk in Certificate of Status Photocopy ☐ Will wait Mail out **AMENDMENTS NEW FILINGS** Amendment Profit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/QUALIFICATI OTHER FILINGS Foreign Annual Report Limited Partnership ☐ Fictitious Name Reinstatement Trademark Other

CR2E031(7/97)

132/25

Examiner's Initials

CERTIFICATE OF LIMITED PARTNERSHIP

UROSOUTH CLINICAL SERVICES, LTD.

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act (1986) and Section 620.108 of the Florida Statutes, the undersigned, being the sole General Partner of UROSOUTH CLINICAL SERVICES, LTD., hereby duly executes and files with the Florida Secretary of State this Certificate of Limited Partnership.

- 1. Name. The name of the limited partnership is UROSOUTH CLINICAL SERVICES, LTD.
- Address. The business address and the mailing address of the limited partnership is 4709 SW 75th Avenue, Miami Florida 33155.
 - 3. Registered Agent. The name of the registered agent for service of process is Stephen Pierce.
- 4. Address: Registered Agent. The street address for the registered agent is 4709 SW 75th Avenue, Miami Florida 33155.
- 5. Records Offide. The records office of the Limited Partnership is 4709 SW 75th Avenue, Miami Florida 33155.
 - 6. Term. The latest date upon which the Limited Partnership is to be dissolved is December 31, 2040.
- 7. Name and Address of General Partner. The name of the general partner is UROSOUTH, INC., and the address is 4709 SW 75th Avenue, Miami Florida 33155.

Under penalties of perjury, I declare that I have read the foregoing and know the contents-thereof end that the facts stated herein are true and correct.

Signed this ____ day of September, 2000.

UROSOUTH, INC General Pariner /

Stephen Pierce, CEO

ACCEPTANCE BY REGISTERED AGENT

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP, THE UNDERSIGNED HEREBY AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE DISCHARGE OF HIS DUTIES.

DATED THIS

DAY OF SEPTEMBER, 200

Stephen Pierce

Registered Agent

AFFIDAVIT OF CAPITAL CONTRIBUTIONS UROSOUTH CLINICAL SERVICES, LTD.

BEFORE ME, the undersigned constituting the sole general partner of UROSOUTH CLINICAL SERVICES, LTD., a Florida limited partnership, certifies as follows:

- The initial Limited Partners of UROSOUTH CLINICAL SERVICES, LTD. have contributed \$1,000 to the Partnership as their initial capital contribution.
- 2. The initial Limited Partners anticipate making no additional capital contributions other than the contributions stated above.

Signed this 2000 day of September, 2000.

FURTHER AFFIANT SAYETH NAUGHT.

Under penalties of perjury, I declare that I have read the foregoing and that the lasts alleged are true to the best of my knowledge and belief.

UROSOUTH, INC. General Partner

By:______

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