ivision of Corporations

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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LIMITED PARTNERSHIP AMENDMENT

ORLANDO CARDIOVASCULAR CENTER, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	01 2
Estimated Charge	\$105.00
	116
	-

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STATEMENT OF QUALIFICATION FOR FLORIDA LIMITED LIABILITY LIMITED PARTNERSHIP

	The name of the limited partnership as identifie Orlando Cardiovasular Center, Ltd.	ed in the	recor	ds of the F	lorida Der	partme	ent of Stat	ə:	
or <u>Atta</u>	at limited partnership's Florida document num ach certificate of limited partnership, affidavit o nership filing fees.				nd applica	ıble lii	- mited		-
2. §	Suffix adopted for the above named partnership (LLLP,): , L.E.L.P.	LLLP)			 . <u> </u>	TAEC	<u>.</u>	
3.	The street address of its chief executive office: (if different from current recorded address):	1405 Or1a	Sout	h Orange Florida	Avenue,	Suit	7 A A	NOV PT 1	FILE
4.	The street address of principal office in Florida (if different from above)			h Orange Florida		Sui	OF SOTATE TOP ID	PHI2: 5 II	ED
5.]	The limited partnership hereby elects to be a lin	nited lia	bility	limited par	tnership.		₽		
б. Т	The effective date of this filing shall be: X as of the date this document is filed with or a date later than the time of filing:	th the F	lorida	Secretary	of State			-	
7. 5	The name and Florida street address of the part <u>CLO Consulting</u> , Inc. 1405 South Orange Avenue, Suite I Orlando,	. .		nt for servi	ce of proc	ess:			
The that	execution of this statement as a partner constitute the facts stated herein are true.	utes an	affirm	ation unde	r the penal	lties of	f perjury		
Sign	ed this <u>26th</u> day of <u>November</u>		_, _2	001	- 				
Sign	ature of TWO Partners: By: Prese	RA		steen to	r Orland dividual		art Cent	er,	Inc.
Гуре	ed or printed names of partners signing above:	By:	ANDO	HEART C	ENTER, I einstein	NC.,			rtner

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