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## FLORIDA LIMITED PARTNERSHIP

South Pinellas Surgery Center, Ltd., LLP

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$385.00

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**CERTIFICATE OF LIMITED PARTNERSHIP  
OF  
SOUTH PINELLAS SURGERY CENTER, LTD., LLP**

The undersigned General Partner, desiring to form a limited partnership pursuant to the Florida Revised Uniform Limited Partnership Law as set forth in Section 620.108 of the Florida Statutes, hereby state as follows:

1. The name of the partnership shall be SOUTH PINELLAS SURGERY CENTER, LTD., LLP (the "Partnership").

2. The address of the office of the Partnership is:

2191 Ninth Ave. N., Suite 120  
St. Petersburg, FL 33713

3. The name and address of the agent for service of process on the Partnership are as follows:

Patricia Urban  
2191 Ninth Ave. N., Suite 120  
St. Petersburg, FL 33713

4. The name and business address of the sole General Partner are as follows:

<u>NAME</u>	<u>ADDRESS</u>
# P02000129645 SNS Holdings, Inc.	2191 Ninth Ave. N., Suite 120 St. Petersburg, FL 33713

5. The mailing address of the Partnership is:

2191 Ninth Ave. N., Suite 120  
St. Petersburg, FL 33713

6. The latest date upon which the Partnership shall dissolve is December 31, 2052 unless sooner terminated as provided in the Limited Partnership Agreement of South Pinellas Surgery Center, LTD., LLP dated January 1, 2003, or by law.

The execution of this Certificate of Limited Partnership by the undersigned constitutes an affirmation under the penalties of perjury that the facts stated herein are true and correct.

IN WITNESS WHEREOF, the undersigned, constituting the sole General Partner of South Pinellas Surgery Center, LTD., LLP, has

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JULIUS J. CORCORAN  
TALLAHASSEE, FLORIDA

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executed this Certificate of Limited Partnership of South Pinellas Surgery Center, LTD., LLP, on this 1st day of January, 2003.

GENERAL PARTNER:

SNS HOLDINGS, INC.

By: 

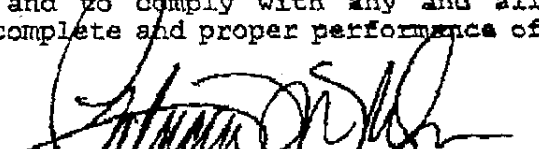
Name: Robert P. Nantals

Title: President

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JAN-JON INCORPORATIONS  
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**ACCEPTANCE OF APPOINTMENT AS REGISTERED AGENT**

The undersigned, having been named as Registered Agent for SOUTH PINELLAS SURGERY CENTER, LTD., LLP, a Florida limited liability limited partnership (the "Partnership") in the foregoing Certificate of Limited Partnership, hereby agrees to accept service of process for the Partnership and to comply with any and all Florida Statutes relative to the complete and proper performance of the duties of Registered Agent.

  
Patricia Urban, REGISTERED AGENT

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**AFFIDAVIT OF CAPITAL CONTRIBUTIONS**

The undersigned, constituting the sole General Partner of SOUTH PINELLAS SURGERY CENTER, LTD., LLLP, a Florida limited liability limited partnership (the "Partnership"), state and certify as follows:

1. The amount of capital contributions to the Partnership made by the Limited Partners is FIFTY THOUSAND DOLLARS (\$50,000.00).

2. The amount of additional capital contributions anticipated to be contributed by the Limited Partners is ZERO.

FURTHER AFFIANT SAYETH NOT.

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

DATED this 1st day of January, 2003.

GENERAL PARTNER

SNS HOLDINGS, INC.,  
a Florida corporation,

By: 

Name: Robert P. Nantais

Title: President

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