## **Certificate of Limited Partnership**

Name of Limited Partnership:

AMBULATORY SURGERY CENTER OF BOCA RATON, LTD.

A04000001900 FILED December 03, 2004 Sec. Of State gharvey

Business Address of Limited Partnership:

9960 CENTRAL PARK BOULEVARD SOUTH SUITE 302 BOCA RATON, FL. US 33428

Mailing Address of Limited Partnership:

9960 CENTRAL PARK BOULEVARD SOUTH SUITE 302 BOCA RATON, FL. US 33428

The name and Florida street address of the registered agent is:

EDWARD J HOPKINS ESQ. ONE NORTH CLEMATIS STREET SUITE 500 WEST PALM BEACH, FL. 33401

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: EDWARD J. HOPKINS

The latest date upon which the Limited Partnership is to be dissolved is:

DECEMBER 1, 2054

The name and address of all general partners are:

Title: G AMBULATORY SURGERY CENTER OF BOCA RATON GP 9960 CENTRAL PARK BLVD. SOUTH #302 BOCA RATON, FL. 33428 US

## Affidavit of Capital Contributions For Florida Limited Partnership

A04000001900 FILED December 03, 2004 Sec. Of State gharvey

The undersigned constituting all of the general partners of: AMBULATORY SURGERY CENTER OF BOCA RATON, LTD.

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is:

45,000.00

The total amount contributed and anticipated to be contributed by the limited partners at this time totals:

70,000.00

Signed this Third day of December, 2004

Under the penalties of perjury I (we) declare the I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

General Partner Signature: KENNETH ROSENTHAL, DIRECTOR