2010 LIMITED PARTNERSHIP REINSTATEMENT

FILED
Oct 01, 2010
Secretary of State

DOCUMENT# A06000000420

Entity Name: SUNCOAST SPECIALTY SURGERY CENTER, LLLP

Current Principal Place of Business:

4519 US HIGHWAY 19
NEW PORT RICHEY, FL 34652

New Principal Place of Business:

5501 W. GRAY STREET
TAMPA, FL 33609

Current Mailing Address:

4519 US HIGHWAY 19
NEW PORT RICHEY, FL 34652

New Mailing Address:

5501 W. GRAY STREET
TAMPA, FL 33609

FEI Number: 20-4570672 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ROWAN, CAREY T M.D.
4519 US HIGHWAY 19
NEW PORT RICHEY, FL 34652 US

Name and Address of New Registered Agent:

CORPDIRECT AGENTS, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: KATIE WONSCH, ASSISTANT SECRETARY 10/01/2010
Electronic Signature of Registered Agent Date

GENERAL PARTNER INFORMATION:

Document #: L06000030184
Name: SUNCOAST SPECIALTY SURGERY HOLDINGS, LLC
Address: 4519 US HIGHWAY 19
City-St-Zip: NEW PORT RICHEY, FL 34652

ADDRESS CHANGES ONLY:

Address:
City-St-Zip:

I hereby certify that the information indicated on this 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: CAREY ROWAN GP 10/01/2010
Electronic Signature of Signing General Partner Date