

**A09000000023**

Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE  
Account Number : 072731001155  
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2009 JAN -8 AM 8:39  
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**FLORIDA/FOREIGN LP/LLLP**

**SOUTH FLORIDA LITHOTRIPSY OF LAKE LAND, LP**

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$1,008.75

**T. CLINE**

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF LIMITED PARTNERSHIP  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. SOUTH FLORIDA LITHOTRIPSY OF LAKE LAND, LP

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)  
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.  
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.  
or LLLP.

2. 15918 Dawson Ridge Drive

(Street address of initial designated office)

Tampa, Florida 33647

3. Mohamed Helal, MD

(Name of Registered Agent for Service of Process)

4. 15918 Dawson Ridge Drive

(Florida street address for Registered Agent)

Tampa, Florida 33647

5. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

x

  
Signature of Registered Agent

6. 15918 Dawson Ridge Drive

(Mailing address of initial designated office)

Tampa, Florida 33647

7. If limited partnership elects to be a limited liability limited partnership, check box ☐

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8. Name and business address of each general partner:

Name:

SOUTH FLORIDA MOBILE  
LITHOTRIPSY, LLC

Business Address:

17359 Emerald Chase Drive

Tampa, FL 33647

LOG-100609

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9. Effective date, if other than the date of filing: \_\_\_\_\_

*(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)*

Signed this 31st day of December, 2008

Signature of each general partner:

SOUTH FLORIDA MOBILE LITHOTRIPSY, LLC

By: 

Mohamed Helal, MD, Member

Filing Fees:

Certified Copy (optional):

Certificate of Status (optional):

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

\$52.50

\$8.75

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