

Certificate of Limited Partnership

A11000000764
FILED
October 24, 2011
Sec. Of State
gharvey

Name of Limited Partnership:

SOUTH FLORIDA LITHOTRIPSY OF WINTER HAVEN, LP

Street Address of Limited Partnership:

92 ADRIATIC AVENUE
TAMPA, FL. US 33606

Mailing Address of Limited Partnership:

92 ADRIATIC AVENUE
TAMPA, FL. US 33606

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

RAVIENDER BUKKAPATNAM
92 ADRIATIC AVENUE
TAMPA, FL. 33606

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

Registered Agent Signature: RAVIENDER BUKKAPATNAM

The name and address of all general partners are:

Title: G
SOUTH FLORIDA MOBILE LITHOTRIPSY, LLC
15918 DAWSON RIDGE DRIVE
TAMPA, FL. 33647 US

The effective date for this Limited Partnership shall be:

10/24/2011

Signed this Twenty Fourth day of October, 2011

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: RAVIENDER BUKKAPATNAM

The individual(s) signing this document affirm(s) that the facts stated herein are true and the individual(s) is/are aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.