

Document Number Only

A 22500

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

200002205102--1
-06/03/97--01001--020
*****35.00 *****35.00

St. Petersburg Surgery Center, Ltd.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

97 JUN -6 PM 4:19

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| <input type="checkbox"/> Profit | <input type="checkbox"/> Amendment | <input type="checkbox"/> Merger |
| <input type="checkbox"/> NonProfit | | |
| <input type="checkbox"/> Limited Liability Co. | | |
| <input type="checkbox"/> Foreign | <input type="checkbox"/> Dissolution/Withdrawal | <input type="checkbox"/> Mark |
| <input type="checkbox"/> Limited Partnership | <input type="checkbox"/> Annual Report | <input type="checkbox"/> Other UCC Filing |
| <input type="checkbox"/> Reinstatement | <input type="checkbox"/> Reservation | <input checked="" type="checkbox"/> Change of R.A. |
| | | <input type="checkbox"/> Fic. Name |
| <input type="checkbox"/> Certified Copy | <input type="checkbox"/> Photo Copies | <input type="checkbox"/> CUS |
| <input type="checkbox"/> Call When Ready | <input type="checkbox"/> Call if Problem | <input type="checkbox"/> After 4:30 |
| <input checked="" type="checkbox"/> Walk In | | <input checked="" type="checkbox"/> Pick Up |
| <input type="checkbox"/> Mail Out | | |

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DIVISION OF CORPORATE

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6/19

John
R.A.
Change

**LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED
OFFICE OR REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes,
the undersigned limited partnership organized under the laws of the state of

Florida, submits the following statement
in order to change its registered office or registered agent, or both, in the state of
Florida.

1. The name of the limited partnership is:

St. Petersburg Surgery Center, Ltd.

2. The date of filing/registration in Florida:

May 6, 1986

3. Document number assigned:

ADR22500

4. The name and address of the present registered agent and office:

Corporation Service Company

1201 Hays St.

Tallahassee, FL 32301

5. The name and address of the successor registered agent and office.:

(P.O. Box not Acceptable)

CT CORPORATION SYSTEM

c/o CT Corporation System, 1200 South Pine Island Road

Plantation, Florida 33324

Such change was authorized by the general partners. SCA-St. Petersburg, Inc.

SIGNATURE:

By:

Beall D. Gary, Jr.
General Partner

Beall D. Gary, Jr.

Date: May 19, 1997

Vice President

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF
PROCESS FOR THE ABOVE STATED LIMITED PARTNERSHIP AT THE PLACE DESIG-
NATED IN THIS CERTIFICATE, 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 OBLIGATION OF MY POSITION AS REGISTERED AGENT.

CT CORPORATION SYSTEM

SIGNATURE:

Dale Morris
(Officer)

Dale Morris, Assistant Vice President

(Type Name and Title of Officer)

Date: June 2, 1997

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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Filing Fee: \$35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA