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(Re	questor's Name)			
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EXAMINER

CORPDIRECT AGE 515 EAST PARK AV TALLAHASSEE, FL 222-1173	ENUE'	merly CCRS)			
FILING COVER S ACCT. #FCA-14	SHEET			•	
CONTACT: DATE:	RICKY SO	<u>ro</u>	\.\\\\	V116X	081
REF. #:	12/11/2008 RA2323.959	<u>65</u>			FILED FILED
CORP. NAME:	PSHS ALPI	HA PARTNERS, LTD			PH 3: 55
() ARTICLES OF INCO () ANNUAL REPORT () FOREIGN QUALIFI () REINSTATEMENT () CERTIFICATE OF O () OTHER:	CATION	(XX) ARTICLES OF AMEN () TRADEMARK/SERVIO () LIMITED PARTNERS () MERGER	CE MARK HIP	() ARTICLES OF () FICTITIOUS NA () LIMITED LIAB () WITHDRAWAI	AME ILITY
		ITH CHECK# 500 CCOUNT IF TO BE			
			COST LIM	IT: \$	
PLEASE RETUI () CERTIFIED COP () CERTIFICATE O	Y ()C	CERTIFICATE OF GOOD S	TANDING	(XX) PLAIN STAI	MPED COPY

Examiner's Initials

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP **OF**

CERTIFI	CATE OF AMEND	MENT	OBOTE 1 PM 3: 53
	TO		
CERTIFICATE	OF LIMITED PAI	RTNERSHIP	
	OF		30%
PSHS Alpha P	artners. LTD		
	y on file with Florida De	partment of State)	
Pursuant to the provisions of section 620.12			
limited liability limited partnership, whose			
	ed Florida document		
adopts the following certificate of amendme	ent to its certificate of	i ilmited partnershi	ıp.
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name o here:	f the limited partners	hip or limited liabil	ity limited partnership
(New name must be disti	nguishahla and aantain	on accontable suffix	
(ivem name must be disti	nguisnabre and contain	an acceptable surnx.	
Acceptable Limited Partnership suffixes: Limited Pa Acceptable Limited Liability Limited Partnership su			L.L.P. or LLLP.
B. If amending mailing address and/or principal office address here:	orincipal office addr	ess, <u>enter new ma</u>	iling address and/or
New Principal Office Address	s: 7597 Lake Wo	ah Da	
(Must be STREET address)	Lake Worth, Fl		
(- Land World, Vi		
New Mailing Address:	5501 W. Grav S	21	
(May be post office box)	Tampa. FL 336		
C. If amonding the resistance agent and to	negletoned affice and to		andon the name of the
C. If amending the registered agent and/or new registered agent and/or the new registere		ess on our records,	enter the name of the
Name of New Registered Agent:	Corp Direct Agents, Inc	·	
New Registered Office Address:	515 East Park Ave.		
Negistered Office Address.		Florida street addres	<u></u>
	Tallahassee	, Florida 32	2301
-	,	, i longa <u>02</u>	

(City)

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

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.

(If Changing Registered Agent, Signature of New Registered Agent)

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
GP	Surgery Partners of Lake Worth, LLC	5501 W. Gray St. Tampa, FL 33609	☑ Add ☐ Remove
GP	Paincare Surgery Centers I, Inc.	1030 North Orange Avenue Suite 105 Orlando, FL 32801	Add Remove
			Add Remove
			☐ Add ☐ Remove
			Add Remove
•			☐ Add ☐ Remove
		···	

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

u	This Limited Par	rtnership hereby (elects to be a "Limited	Liability Limited	Partnership."
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☐ This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

If amending any other information, enter change(s) here:	(Attach additional sheets, if necessary.)
fective date, if other than the date of filing:	te this document is filed by the Florida Department of
gnature(s) of a general partner or all general partne	<u>rs*:</u>
NOTE: Only one current general partner is required to sign this do noving a "limited liability limited partnership" election statement. en adding or removing a "limited liability limited partnership" elec	Chapter 620, F.S., requires all general partners to sign
	,
	·
gnature(s) of all new or dissociating general partner	(s), if any:
Surnery Partners of Lake Worth, LLC.	Paircas Susans Centure T
Surgery Partners of Lake Worth, LLC.	D. M. C.
Michael Dayle persont	
11	Mark Seporker CFO
Rodolfo Bari, CEO	
iling Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	