Address Tallahassee, Florida 32301

City/State/Zip

Phone #

224-7000

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Christian (Corpora	Hospital St		ment #)	
2(Согрога	tion Name)	(Досш	ment #)	
3. (Corpora	ition Name) — 88.75	(Доеш	ment =)	98 DEC 1
Walken W	Pick up time 2:(00	Certified Copy	PM 4: 31
NEW FILINGS	AMENDMEN	Photocopy TS	Certificate of S	tatus
Praint NonProfit	Amendment Resignation of R.A	, Officer/ Director	-(7)	
Limited Liability	Change of Register	red Agent		· -
Domestication	Dissolution/Withda	rawal		_
Other	Merger			

OTHER FILINGS	REGISTRATION/
Annual Report	養養
Fictitious Name	Foreign
Fictitious Name WOLLY VOLUME 15 + C; Name Reservation	Limited Partnership
UEUTI VAID-15	SS Reinstatement
	Trademark
	Other

400002711894--8 -12/15/98--01001--001 *****150.00 ****150.00

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 11, 1998

HOLLAND & KNIGHT

TALLAHASSEE, FL

SUBJECT: CHRISTIAN HOSPITAL SRO, LTD.

Ref. Number: W98000027870

We have received your document for CHRISTIAN HOSPITAL SRO, LTD. and check(s) totaling \$150.00. However, your check(s) and document are being returned for the following:

PLEASE note that we have RETURNED your \$150.00 check.

The required fees to file the partnership total \$87.50. A certified copy is \$52.50. A CUS is \$8.75.

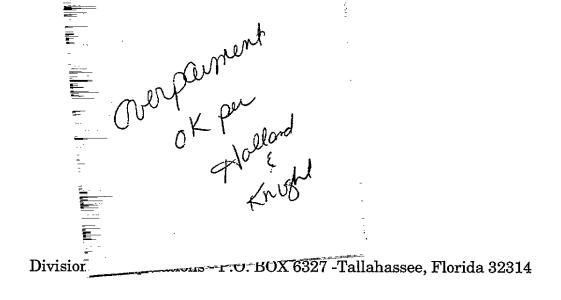
Please return your filing with a CORRECT FEE AMOUNT and a notation of what you want to receive -- certified copy, CUS, etc.,

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr Corporate Specialist

Letter Number: 498A00058686



CERTIFICATE OF LIMITED PARTNERSHIP OF

CHRISTIAN HOSPITAL SRO, LTD. The undersigned, pursuant to the provisions of Section 620.108 of the Florida Statutes, do hereby certify and swear in this Certificate of Limited Partnership to the following:

1. NAME.

The name of the Limited Partnership is:

CHRISTIAN HOSPITAL SRO, LTD.

2. REGISTERED AGENT.

The name and address of the Registered Agent for the Limited Partnership is:

Lynn C. Washington Holland & Knight LLP 701 Brickell Avenue, Suite 3000 Miami, Florida 33131

3. GENERAL PARTNER.

The name and business address of the general partner is:

CHRISTIAN HOSPITAL SRO DEVELOPMENT, INC. 600 Brickell Avenue, Suite 502 P98000103553 Miami, FL 33131

4. MAILING ADDRESS.

The mailing address for the Limited Partnership and the location of its principal place of business is as follows:

> 600 Brickell Avenue, Suite 502 Miami, FL 33131

DISSOLUTION DATE. 5.

The latest date upon which the limited partnership is to dissolve is December 31, 2048.

IN WITNESS WHEREOF, the General Partner has executed this Certificate of Limited Partnership this 8thday of December, 1998.

CHRISTIAN HOSPITAL SRO DEVELOPMENT,

INC., a Florida corporation

By:

Cordella Ingram President

ACCEPTANCE

Pursuant to Section 620.192 of the Florida Statutes, the undersigned accepts its appointment as registered agent for CHRISTIAN HOSPITAL SRO, LTD., a Florida limited partnership, and accepts all obligations imposed on it as such under Florida law.

Executed this 8th day of December, 1998.

Lynn G. Washington

	AFFIDAVIT	
STATE OF FLORIDA)	K. ST.
COUNTY OF MIAMI-DADE) ss:)	3

The undersigned as general partners of CHRISTIAN HOSPITAL SRO, LTD., a Florida limited partnership ("Limited Partnership"), declare as follows:

The total of capital contributions of the limited partners of the Limited Partnership through this date is \$1.00 and the anticipated future capital contributions of the limited partners to the Limited Partnership is \$100.

> CHRISTIAN HOSPITAL SRO DEVELOPMENT, INC., a Florida corporation

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE) ss:)
, 1998 by Cordella Ingram as	as acknowledged before me this 8thday of December President of CHRISTIAN HOSPITAL SRO ration, on behalf of the corporation. She is personally as identification.
	Name: Tanya Michele Starkey Commission No.: 20489113 Notary Public State of Florida at Large
My commission expires: Aug. 16, 1999	or I fortail the Entire
	DIVISION OF CUI
MIA4-680548.1	PA H. CORPORATION OF STATE OF