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FOREIGN LIMITED PARTNERSHIP

Sand Lake Surgery Center, L.P.

Certificate of Status	0
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Page Count	03
Estimated Charge	\$87.50

B03-226
OK

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**1. Sand Lake Surgery Center, L.P.

(Name of limited partnership as it is in the home state)

2. _____

(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")3. Delaware

(State of Formation)

4. June 18, 2003

(Date of Formation)

5. NRAI Services, Inc.

(Name of Registered Agent for Service of Process)

6. 528 East Park Avenue

(Street Address of Registered Office)

Tallahassee

(City)

Florida 32301

(Zip Code)

7. Acceptance by the Registered Agent for Service of Process:

ACSON HAND ASST SECY

(Agent must sign on this line)

NRA089

8. 30 Burton Hills Boulevard, Suite 450, Nashville, Tennessee 37215

(Address of registered office required in state of formation or, if not required, address of principal office.)

9. NAMES OF GENERAL PARTNERS

STREET ADDRESS

Surge of Sand Lake, Inc.30 Burton Hills Boulevard, Suite 450, Nashville, Tennessee 37215FD3-40210. 30 Burton Hills Boulevard, Suite 450, Nashville, Tennessee 37215

(Office where Names, Addresses and Contributions of Limited Partners are kept.)

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the
limited partner or limited partners until the limited partnership's registration in Florida is canceled or
withdrawn.

CONTINUED

12. 30 Burton Hills Boulevard, Suite 450, Nashville, Tennessee 37215

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 17th day of June, 2003


General Partner
Jeffrey A. Sogle, VP/CFO of Surgis of Sand Lake, Inc.
Tennessee

STATE OF

COUNTY OF Davidson

On this 17th day of June, 2003

Jeffrey A. Sogle, VP/CFO of Surgis of Sand Lake, Inc. personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____


(Notary Public Signature)

Linda Susan Zoeller
(Notary's Printed Name)

Seal

My Commission Expires: 7/24/04

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Jeffrey A. Bogle, VP/CFO of Surgis of Sand Lake, Inc.
a general partner of Sand Lake Surgery Center, L.P., a (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 1,000.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 1,000.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 17th day of June, 2003.



General Partner
Jeffrey A. Bogle, VP/CFO of Surgis of Sand Lake, Inc.

STATE OF Tennessee

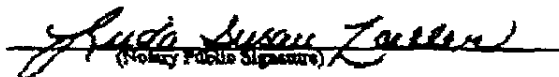
COUNTY OF Davidson

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☐ whose identity I proved on the basis of _____


(Notary Public Signature)

Linda Susan Zoeller
(Notary's Printed Name)

Seal

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