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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
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TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION
Surgery Partners, Inc.

Certificate of Status	0
Certified Copy	1
Page Count	07
Estimated Charge	\$78.75

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TALLAHASSEE, FLORIDA

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11/6/2015 3:59:50 PM From: To: 8506176383(2/7)

Surgery Partners, LLC
40 Burton Hills Blvd., Suite 500
Nashville, TN 37215

November 2, 2015

Florida Department of State
Division of Corporations
Corporate Filings
P.O. Box 6327
Tallahassee, FL 32314
(850) 245-6052

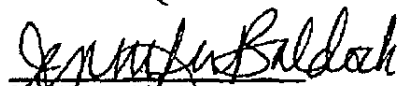
Re: Consent to use of name

Ladies and Gentlemen:

Surgery Partners, LLC, a limited liability company formed under the laws of the State of Florida on May 12, 2004, hereby consents to the use of name Surgery Partners, Inc., a Delaware Corporation, for its use in qualifying in the State of Florida.

IN WITNESS WHEREOF, the undersigned, as an authorized person of Surgery Partners, LLC has caused this consent to be executed this 2 day of November, 2015.

SURGERY PARTNERS, LLC

By: 
Name: Jennifer Baldock
Title: Senior Vice President and Secretary

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OFFICE OF THE
CLERK OF THE
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

**IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.**

1. Surgery Partners, Inc.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")
- (If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. Delaware 3. _____
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. 04/02/2015 5. Perpetual
(Date of incorporation) (Date of duration, if other than perpetual)
6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 40 Burton Hills Blvd., Suite 500 Nashville, TN 37215
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

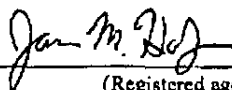
Name: CT Corporation System
Office Address: 1200 South Pine Island Road
Plantation, FL, Florida 33324
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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.

CT Corporation System

By: _____



James Halpin, Asst. Secretary

(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Please see Exhibit A

Address:

Vice Chairman:

Address:

Director:

Address:

Director:

Address:

B. OFFICERS

President: Please see Exhibit B

Address:

Vice President:

Address:

Secretary:

Address:

Treasurer:

Address:

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12.

Jennifer Baldock

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is 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.

13. Jennifer Baldock Senior Vice President and Secretary

(Typed or printed name and capacity of person signing application)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Exhibit A

NAME:	TITLE:	ADDRESS:
MICHAEL DOYLE	CEO & PRESIDENT	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215
TERESA SPARKS	EXECUTIVE VICE PRESIDENT & CFO	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215
JENNIFER BALDOCK	SENIOR VICE PRESIDENT & SECRETARY	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215
DENNIS DEAN	SENIOR VICE PRESIDENT & CORPORATE CONTROLLER	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215

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Exhibit B

NAME:	TITLE:	ADDRESS:
MICHAEL T. DOYLE	DIRECTOR	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215
MATTHEW I. LOZOW	DIRECTOR	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215
ADAM FEINSTEIN	DIRECTOR	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215
CHRISTOPHER LAITALA	DIRECTOR	40 BURTON HILLS BLVD., SUITE 500 NASHVILLE, TN 37215

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TALLAHASSEE, FLORIDA

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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SURGERY PARTNERS, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF OCTOBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.



5722138 8300

SR# 20150367998

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 10175361

Date: 10-02-15