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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : PAUL A. MURRAY, P.A.
Account Number : I19990000229
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LIMITED LIABILITY COMPANY

COLONNADE AMBULATORY SURGICAL CENTER, LLC

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H02000090909 1

ARTICLES OF ORGANIZATION
OF
COLONNADE AMBULATORY SURGICAL CENTER, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I -- NAME

The name of the Limited Liability Company is **COLONNADE AMBULATORY SURGICAL CENTER, LLC**

ARTICLE II -- ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 5117 Castello Drive, Suite 2, Naples FL 34103.

ARTICLE III -- REGISTERED AGENT, REGISTERED OFFICE,
& REGISTERED AGENT'S SIGNATURE

The name and Florida street address of the registered agent are: Paul A. Murray, 5117 Castello Drive, Suite 2, Naples FL 34103.

Having been named as registered agent of the above stated limited liability company at the place designated in the articles of organization, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided in Chapter 608, F.S.


Paul A. Murray

ARTICLE IV --MANAGEMENT

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager-managed company.

In accordance with sections 608.408 (3), Florida statutes, the executions of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.


Zannos G. Grekos

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