

L03000027502

Florida Department of State
Division of Corporations
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To: Division of Corporations
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7-25-03

DIVISION OF CORPORATION

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RECEIVED

LIMITED LIABILITY COMPANY

Pavilion General Partner, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

L03-27502

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**ARTICLES OF ORGANIZATION
OF
PAVILION GENERAL PARTNER, LLC**

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company shall be: **PAVILION GENERAL PARTNER, LLC.**

ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be c/o Weston Outpatient Surgical Center, Ltd., 2229 North Commerce Parkway, Suite 100, Weston, Florida 33326, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is c/o Weston Outpatient Surgical Center, Ltd., 2229 North Commerce Parkway, Suite 100, Weston, Florida 33326. The initial registered agent at that address is Richard Famiglietti.

ARTICLE IV

This limited liability company shall commence its existence as of the execution hereof on July 25, 2003, and shall exist perpetually thereafter unless sooner dissolved.

ARTICLE V

This limited liability company shall be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 25th day of July, 2003.


Richard Famiglietti, Member

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JUL 28 11 31 AM '03

RECORDED DATE
7-25-03

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST -- The name of the limited liability company is Pavilion General Partner, LLC.

SECOND -- The name and address of the registered agent and office is:

Richard Famiglietti
c/o Weston Outpatient Surgical Center, Ltd.
2229 North Commerce Parkway
Suite 100
Weston, Florida 33326

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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.

Dated this 25th day of July, 2003.


Richard Famiglietti, Registered Agent

#117978

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