# Electronic Articles of Organization For Florida Limited Liability Company

L04000074562 FILED 8:00 AM October 14, 2004 Sec. Of State mthomas

## Article I

The name of the Limited Liability Company is:

AMBULATORY SURGERY ASSOCIATES OF CLERMONT, LLC

#### **Article II**

The street address of the principal office of the Limited Liability Company is: 10345 ORANGEWOOD BLVD ORLANDO, FL. US 32821

The mailing address of the Limited Liability Company is:

10345 ORANGEWOOD BLVD ORLANDO, FL. US 32821

## **Article III**

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

#### **Article IV**

The name and Florida street address of the registered agent is:

CENTRAL FLORIDA PHYSIATRISTS, P.A. 10345 ORANGEWOOD BLVD ORLANDO, FL. 32821

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.

Registered Agent Signature: MATT IMFELD

## Article V

The name and address of managing members/managers are:

Title: MGRM DAVID LUCAS M.D 235 CITRUS TOWER BLVD, SUITE 102 CLERMONT, FL. 34711 US

Title: MGRM FRANK FISCHER III,M.D 1420 TOUCHTON LN, S.E. WINTER HAVEN, FL. 33884 US

Title: MGRM KEVIN NOWICKI M.D. 12113 CRESCENT COVE COURT WINDERMERE, FL. 34786 US

Title: MGRM MATT IMFELD M.D. 10345 ORANGEWOOD BLVD ORLANDO, FL. 32821 US

Title: MGRM DAVID ALLYN M.D. 1976 BRANTLEY CLERMONT, FL. 34711 US

Title: MGRM MAYSSA TOPPINO M.D. PO BOX 687 MINNEOLA, FL. 34755 US

#### **Article VI**

The effective date for this Limited Liability Company shall be: 10/15/2004

Signature of member or an authorized representative of a member Signature: MATT IMFELD

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