2007 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Jun 04, 2007
Secretary of State

DOCUMENT# L04000086106

Entity Name: CARDIOTHORACIC SURGICAL ASSOCIATES, LLC

Current Principal Place of Business:

11760 SW 40 STREET
SUITE 722
MIAMI, FL 33175

New Principal Place of Business:

8950 N. KENDALL DRIVE
SUITE 607-W
MIAMI, FL 33176

Current Mailing Address:

11760 SW 40 STREET
SUITE 722
MIAMI, FL 33175

New Mailing Address:

8950 N. KENDALL DRIVE
SUITE 607-W
MIAMI, FL 33176

FEI Number: 86-1122569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LEHRMAN, JEFFREY E ESQ.
2199 PONCE DE LEON BLVD.
SUITE 304
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JEFFREY E LEHRMAN ESQ.

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: LAMELAS, JOSEPH
Address: 11760 SW 40 STREET
City-St-Zip: MIAMI, FL 33175

ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition
Name: LAMELAS, JOSEPH
Address: 8950 N. KENDALL DRIVE STE 607-W
City-St-Zip: MIAMI, FL 33176

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSEPH LAMELAS MGR 06/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date