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DIVISION OF THE SECRETARY OF STATE

LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Rick up time Certified Copy Mail out Will wait Certificate of Status Photocopy **NEW FILINGS AMENDMENTS** Profit Amendment Not for Profit Resignation of R.A., Officer/Director **Limited Liability** Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION

OF

BAYSHORE SURGICAL ASSOCIATES, LLC.

ARTICLE I NAME

The name of this Limited Liability Company is: BAYSHORE SURGICAL ASSOCIATES. LLC.



ARTICLE II PURPOSE

This Limited Liability Company is organized for the purposes of transacting any and all lawful business or activity permitted under the laws of the United States and the State of Florida.

ARTICLE III ADDRESS

The principal office and mailing address of this Limited Liability Company, which are identical, is:

Address: 3661 SO. MIAMI AVENUE, SUITE 901, MIAMI, FL 33133

ARTICLE IV INITIAL REGISTERED OFFICE AND AGENT The initial registered office address and agent of this Limited Liability Company is: Agent: JUAN C. FLEITES Address: 3661 SO. MIAMI AVENUE, SUITE 901, MIAMI, FL 33133

ARTICLE V AMENDMENTS

This Limited Liability Company, with the unanimous written consent of the members, shall have the right to amend or repeal any provisions contained in these Articles of Organization or any amendments hereto. Further, the power to adopt, alter, amend or repeal the Company's operating agreement shall be vested in the Company's members.

ARTICLE VI MANAGEMENT / MEMBERS

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

This Limited Liability Company will be managed by one manager and will have one member initially.

The name and address of each Manager or Managing Member of this Limited Liability Company are:

NAME ADDRESS TITLE

JUAN C. FLEITES 3661 SO. MIAMI AVE. STE 901 MANAGER/MEMBER

MIAMI. FLORIDA 33133

ARTICLE VII INDEMNITY

This Limited Liability Company does hereby indemnify its Managers for any of their conduct on behalf of or related to their duties as Managers of the Limited Liability Company and hold them harmless for any acts on behalf of or in connection with their services for the Limited Liability Company.

The undersigned has executed these Articles of Organization this _7th day of __MARCH_____, 2006.

C. FLEITES

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of the Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the state of Florida, submits the following statement in designating the registered office / registered agent, in the state of Florida.

1. The name of this L.L.C. is: BAYSHORE SURGICAL ASSOCIATES. LLC.

2. The name and address of the registered agent and office is:

Name: JUAN C. FLEITES

Address: 3661 SO, MIAMI AVENUE, SUITE 901, MIAMI, FL 33133

NAN C. FLEITES

TITLE: Registered Agent

DATE: <u>MARCH 7, 2006</u>

ACKNOWLEDGMENT AND ACCEPTANCE

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 herby 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 for in Chapter 608, F.S.

JVAN C. FLETTES

DATE: MARCH 7, 2006