

2007 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000048140

Entity Name: BOCA SURGEONS, LLC

FILED
Oct 17, 2007
Secretary of State

Current Principal Place of Business:

9980 CENTRAL PARK BLVD., NORTH, SUITE 124
BOCA RATON, FL 33428

New Principal Place of Business:

1601 CLINT MOORE ROAD
SUITE 170
BOCA RATON, FL 33487

Current Mailing Address:

9980 CENTRAL PARK BLVD., NORTH, SUITE 124
BOCA RATON, FL 33428

New Mailing Address:

1601 CLINT MOORE ROAD
SUITE # 170
BOCA RATON, FL 33487

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) 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:

MENKHAUS, DAVID J
1900 GLADES RD., SUITE 401
BOCA RATON, FL 33431 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: DAVE MENKHAUS

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: DR () Change (X) Addition
Name: NACHLAS, NATHAN E
Address: 1601 CLINT MOORE ROAD, SUITE 170
City-St-Zip: BOCA RATON, FL 33487

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: NATHAN NACHLAS, MD

DR.

10/17/2007

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