

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000000224

FILED
Jan 12, 2009
Secretary of State

Entity Name: PARK MEDICAL SURGERY CENTER, LLC

Current Principal Place of Business:

5000 PARK STREET NORTH
ST. PETERSBURG, FL 33709 US

New Principal Place of Business:

5000 PARK STREET NORTH
SUITE 1101
ST. PETERSBURG, FL 33709 US

Current Mailing Address:

5000 PARK STREET NORTH
ST. PETERSBURG, FL 33709 US

New Mailing Address:

5000 PARK STREET NORTH
SUITE 1101
ST. PETERSBURG, FL 33709 US

FEI Number: 20-8140515 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MCCALLUM, KEVIN
5000 PARK STREET NORTH
ST. PETERSBURG, FL 33709 US

Name and Address of New Registered Agent:

DESAI, KIRIT S
5000 PARK STREET NORTH
SUITE 1101
ST. PETERSBURG, FL 33709 US

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: KIRIT DESAI

01/12/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MCCALLUM, KEVIN
Address: 5000 PARK STREET NORTH
City-St-Zip: ST. PETERSBURG,, FL 33709 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: DESAI, KIRIT S
Address: 5000 PARK STREET NORTH, SUITE 1101
City-St-Zip: ST. PETERSBURG,, FL 33709 US

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: KIRIT DESAI

MGR

01/12/2009

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