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(Requestor's Name)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:	7		
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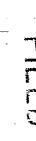


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SECRETARY OF STATE

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## SWEETWATER LAW OFFICES, PLC

900 FOX VALLEY DRIVE, SUITE 102 LONGWOOD (ORLANDO), FLORIDA 32779-2551 (407) 869-1680 \* FAX (407) 862-0185 \* (800) 869-1680 EMAIL: thomrogers@attorney-cpa.com

January 22, 2007

Registration Section
Division of Corporations
Department of State
PO Box 6327
Tallahassee, Florida 32314

Re: ORANGE AVENUE SURGICAL SUITE, LLC

Dear Sir:

Enclosed please find the original and a copy of the following documents for Orange Avenue Surgical Suite, LLC for filing with your office:

- Articles of Organization executed on January 22, 2007, and
- Certificate of Designation of Registered Agent/Registered Office

Also enclosed please find a check in the amount of \$160 to cover:

1.	Filing Fee for Articles of Organization	\$100.00
2.	Registered Agent Filing Fee	\$ 25.00
3.	Certified Copy of Articles of Organization	\$ 30.00
4.	Certificate of Status	\$ 5.00

Once the application has been filed, please return a copy to us.

If you have any questions or comments regarding the above, please do not hesitate the contact us.

Respectfully,

SWEETWATER LAW OFFICES, PLC

By: Thom Rogers as Manager

**Enclosures** 

ORANGE AVENUE SURGICAL SUITE, LLC

#### ARTICLES OF ORGANIZATION

#### **OF**

### ORANGE AVENUE SURGICAL SUITE, LLC

The undersigned, being authorized to execute and file these Articles of Organization for ORANGE AVENUE SURGICAL SUITE, LLC, a Limited Liability Company, hereby certifies the following:

#### **ARTICLE ONE - NAME**

The Limited Liability Company name is: ORANGE AVENUE SURGICAL SUITE, LLC.

#### **ARTICLE TWO - DURATION**

The period of duration of the Limited Liability Company shall commence on the date that these Articles of Organization are recorded and shall continue in perpetuity, unless the Limited Liability Company earlier dissolves in accordance with the provisions of its regulations.

#### ARTICLE THREE - ADDRESS

The mailing address and street address of the Limited Liability Company is:

3872 Oakwater Circle Orlando, Florida 32806

#### ARTICLE FOUR - REGISTERED AGENT

The name of the Limited Liability Company's initial registered agent is:

Sweetwater Law Offices, PLC

The principal office, street address and mailing address of the Limited Liability Company's registered agent is:

Sweetwater Square, Suite 102 900 Fox Valley Drive Longwood, Florida 32779

#### ARTICLE FIVE - MANAGER

The Limited Liability Company will be operated by a Manager.

**IN WITNESS WHEREOF**, I have signed these Articles of Organization as an authorized representative of a Member and acknowledge were executed on January 22, 2007, by the undersigned.

Thom Roger

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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, SWEETWATER LAW OFFICES, PLC hereby accepts the appointment as registered agent and agrees to act in this capacity. SWEETWATER LAW OFFICES, PLC further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and SWEETWATER LAW OFFICES, PLC is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 608, F.S.

SWEETWATER LAW OFFICES, PLC

Registered Agent's Signature

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408 (3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)

Thom Rogers

SECRETARY OF STATE