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COVER LETTER

TO:

Registration Section
Division of Corporations

Baptist Surgery and Endoscopy Centers, L.L.C.

SUBJECT

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David Friedman

Name of Person

Baptist Health South Florida

Firm/Company

6855 Red Road, Suite 500

Address

Coral Gables, Florida 33143

City/State and Zip Code -

davidfr@baptisthealth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

David Friedman

786

662-7022

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

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FILED

STATEMENT OF AUTHORITY

| FIRST: | The name of the limited liabi | ity company is: _ | laptist Surge | y and Endosco | opy Centers, L | .L.C. |
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| | D: The Florida Document Nu | | | | | - · |
| THIRD: | The street address of the lim 6855 Red Road | ted liability compa | any's principa | l office is: | | |
| | Suite 600 | | | | | |
| | Coral Gables, Florida | 33143 | | | | |
| | The mailing address of the I | imited liability cor | mpany's princ | pal office is: | | |
| | Suite 600 | | | | | • |
| | Coral Gables, Florida | 33143 | , | • | | |
| position | H: This statement of authority of a person in a company, who is the following: 1. May execute an instrume | ther as a member, at transferring real | transferee, ma | anager, officer o | r otherwise or to the company. | |
| position | of a person in a company, who the following: 1. May execute an instrume | ther as a member, | transferee, ma | anager, officer o | r otherwise or to the company. | a specific |
| osition | of a person in a company, who the following: 1. May execute an instrume | ther as a member, at transferring real | transferee, ma | anager, officer o | r otherwise or to the company. | a specific |
| osition | of a person in a company, who the following: 1. May execute an instrume a. Granted to: Corporation | ther as a member, at transferring real otist Ambulato | property held | in the name of the local in the name of the local in the | the company. | a specific |
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