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From:

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Fax Number

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7	Addrage			

JUN -- 5

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN PACAYA BAY SURGERY CENTER LLC

Certificate of Status	0
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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Company as it now appears on our records.)

PACAYA BAY SURGERY CENTER LLC

(A	Florida Limited Liability Company)	(a) (f) (g)
The Articles of Organization for this Limited Li Florida document number <u>L08000108956</u>	ability Company were filed on 11/24/2008	and ssigned
This amendment is submitted to amend the follo	owing:	
A. If amending name, enter the new name of	the limited liability company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Company," the designation	n "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	
(Principal office address MUST BE A STREE	T ADDRESS)	
Enter new mailing address, if applicable:		
, , , , , , , , , , , , , , , , , , , ,	BOY	
(Mailing address MAY BE A POST OFFICE)	<u> </u>	
B. If amending the registered agent and/or the new registered of	or registered office address on our records, <u>ent</u> fice address here:	er the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
•	, Florida	
	City	Zin Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to uct in this capacity. I further agree to comply with the provisions of all statutes relative 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. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	Name	Address	Type of Action
MGRM	SANDRA D. RITROSKY	13981 MCGREGOR BLVE	Add
		SUITE 101	Remove
		FT. MYERS, FL 33919	_
MGRM	SUSAN B. HILL	13981 MCGREGOR BLVE	Add
-		SUITE 101	Remove
		FT. MYERS, FL 33919	··•
			Add
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If amending any	other information, en	iter change(s) here	: (Attach additional	sheets, if necessary.)	
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ed June	5	2012			
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	Signature o	of a member or author	ized representative of	a member	_
MIC	HAEL S. SINGE	ER, ESQ., AL	ITHORIZED I	REPRESENTA	TIV

Typed or printed name of signee Page 3 of 3

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