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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone

: (850)222-1092

Fax Number

: (850)878-5368

LORIDA/FOREIGN LIMITED LIABILITY CO.

Rinehard Surgery Center of Lake Mary, L.L.C.

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JUN -1 2009

Electronic Filing Menu

Corporate Filing Menu

HEXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Rinehart Surgery Center of L			
(Must end	with the words "Limi	ted Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address	s:		·
The mailing address and	l street address o	f the principal office of the Limited L	ability Company is:
Principal Office Addre	<u>:85:</u>	Mailing Address:	
917 Rinehart Road		917 Rinchart Road	
Suite 1001		Suite 1001	
		Suite 1001	
Lake Mary, FL 32746 ARTICLE III - Registe	y cannot serve as its of	Lake Mary, FL 32746 istered Office, & Registered Agent' wn Registered Agent, You must designate an indiv	S Signature S Signature S Signature S Signature S S S S S S S S S S S S S S S S S S S
Lake Mary, FL 32746 ARTICLE III - Registe (The Limited Liability Company business entity with an active F	y cannot serve as its o' Florida registration.) la street address	Lake Mary, FL 32746 istered Office, & Registered Agent'	HAY 29
Lake Mary, FL 32746 ARTICLE III - Registe (The Limited Liability Company business entity with an active F	y cannot serve as its o' Florida registration.) la street address	Lake Mary, FL 32746 istered Office, & Registered Agent' was Registered Agent, You must designate an indiv- of the registered agent are:	29 AR ARY OF ASSEE.
Lake Mary, FL 32746 ARTICLE III - Registe (The Limited Liability Company business entity with an active F	y cannot serve as its o' Florida registration.) la street address CTC	Lake Mary, FL 32746 istered Office, & Registered Agent' wn Registered Agent. You must designate an indiv of the registered agent are: orporation System	29 A B. ASSEE, FLO
Lake Mary, FL 32746 ARTICLE III - Registe (The Limited Liability Company business entity with an active F	y cannot serve as its o Florida registration.) la street address CTC	Lake Mary, FL 32746 istered Office, & Registered Agent' we Registered Agent, You must designate an indiv- of the registered agent are: orporation System Name	29 AR ARY OF ASSEE.
Lake Mary, FL 32746 ARTICLE III - Registe (The Limited Liability Company business entity with an active F	y cannot serve as its o' Florida registration.) la street address C T C 1200 So Florida s	Lake Mary, FL 32746 istered Office, & Registered Agent' wn Registered Agent, You must designate an Indiv of the registered agent are: orporation System Name outh Pine Island Road	29 A B. ASSEE, FLO

(CONTINUED)
Page 1 of 2

C T Corporation System

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

alyani Gaddipati, M.D. 17 Rinchart Road #2051 ake Mary, FL 32746 enkayla Millaiah, M.D. 11 N Mangonstine Ave anford, FL 32771 Elix Navarro, M.D.
17 Rinchart Road #2051 ake Mary, FL 32746
17 Rinchart Road #2051 ake Mary, FL 32746
ake Mary, FL 32746
enkayla Millaiah, M.D. II N Mangonstine Ave
II N Mangonstine Ave
anford, FL 32771
elix Navatto, M.D.
101
403 Medical Plaza Drive, #206
70
nomas Bombardier, M.D.
95 Hanover, Suite 2
anover, MA 02339

REQUIRED SIGNATURE:

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

(th accordance with section 608,408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Gretchen Townshend

Typed or printed name of signee

Filing Fees;

\$125.00 Filing Pec for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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