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B. KOHR

OCT 12 2009

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-14**

**CONTACT:** KATIE WONSCH

**DATE:** 09/24/09

**REF. #:** 001518.111319

**CORP. NAME:** SOUTHEAST ANESTHESIA PARTNERS LLC

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- |   |   |  |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION    | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT                | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME         |
| <input type="checkbox"/> FOREIGN QUALIFICATION        | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input type="checkbox"/> LIMITED LIABILITY       |
| <input type="checkbox"/> REINSTATEMENT                | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL              |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION  |   |  |
| <input checked="" type="checkbox"/> OTHER: CORRECTION |   |  |

STATE FEES PREPAID WITH CHECK# 531894 FOR \$ 55.00

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ **COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

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|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

**FIRST:** The name of the limited liability company is:  
SOUTHEAST ANESTHESIA PARTNERS LLC

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
Article IV - Manager(s)

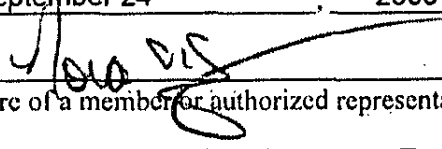
The Company is to be a manager-managed company. The name and address  
of each initial Manager is as follows:

Greg Wachowiak, 3079 Peachtree Industrial Boulevard, Duluth, Georgia 30097

**OR**

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: September 24, 2009

  
Signature of a member or authorized representative of a member

Nora H Hernandez, Greenberg Traurig, LLP

Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)

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**ARTICLES OF ORGANIZATION  
OF  
SOUTHEAST ANESTHESIA PARTNERS LLC**

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DIVISION OF CORPORATIONS  
09 SEP 21 AM 8:03

**ARTICLE I - Name**

The name of the Limited Liability Company is Southeast Anesthesia Partners LLC (the "Company").

**ARTICLE II - Address**

The mailing address and street address of the principal office of the Company is 3079 Peachtree Industrial Boulevard, Duluth, Georgia 30097.

**ARTICLE III - Registered Agent and Office**

The street address of the Company's initial registered office is 515 E. Park Avenue, Tallahassee, FL 32301, and the name of its initial registered agent at such office is CorpDirect Agents, Inc.

**ARTICLE IV - Manager(s)**

The Company is to be a manager-managed company. The name and address of each initial Manager is as follows:

Sean M. Lynch  
3079 Peachtree Industrial Boulevard  
Duluth, Georgia 30097

Greg Wachowiak  
3079 Peachtree Industrial Boulevard  
Duluth, Georgia 30097

**ARTICLE V - Initial Member**

The name and address of the initial Member of the Company is as follows:

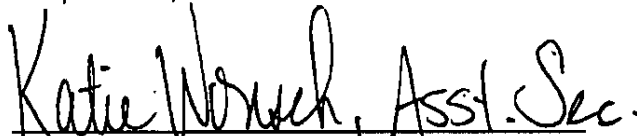
Andre Dobson  
3079 Peachtree Industrial Boulevard  
Duluth, Georgia 30097

In 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. Dated this 21<sup>st</sup> day of September, 2009.

  
Authorized Signor

**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**

The undersigned, having been named as Registered Agent and to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 608. Dated this 21<sup>st</sup> day of September, 2009.

  
CORPDIRECT AGENTS, INC.  
Registered Agent