

L09000115168

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H09000253342 3)))



H090002533423ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FILED
2009 DEC -7 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
SUN CITY CENTER OUTPATIENT SURGICAL CENTER, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. LEWIS

DEC 8 2009

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

RECEIVED

09 DEC -7 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3

Amended Articles of Organization
of

Sun City Center Outpatient Surgical Center, LLC

The undersigned natural person(s), of the age of eighteen years or more, acting as organizers of a limited liability company under the State of Florida Limited Liability Company Act, adopt(s) the following Articles of Organization for such limited liability company.

Article 1. Name of Limited Liability Company

L09000115168

The name of this limited liability company is Sun City Center Outpatient Surgical Center, LLC

Article 2. Registered Office and Registered Agent

The initial registered office address of this limited liability company and the name of its initial registered agent at this address are:

Max A. Adams, Esq.
The Medi-Law Firm
1400 N.W. 10TH Avenue
Penthouse III
Miami, Florida 33136

Article 3. Statement of Purposes

The purposes for which this limited liability company is organized are:

To engage in the lawful practice of property ownership and management under the laws of the State of Florida.

Article 4. Management and Names and Addresses of Initial Manager

This will be a member-managed company. The name and address of each member is:

CRAIG E. AMSHEL
1901 Haverford #105
Sun City Center, FL 33573

Article 5. Principal Place of Business of the Limited Liability Company

The principal place of business of the limited liability company shall be:

1901 Haverford #105
Sun City Center, FL 33573

Article 6. Period of Duration of the Limited Liability Company

409000253342

FILED
2009 DEC -7 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

409000253342

H09000253342

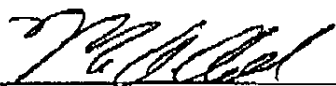
The period of duration of the limited liability company shall be:

"Perpetual"

Article 7. Company Existence

The Company's existence shall begin effective as of December 7, 2009.

The undersigned authorized representative of a member executed these Articles of Organization on 12/7/2009.



By Max A. Adams, as attorney-in-fact

STATEMENT OF REGISTERED AGENT

LIMITED LIABILITY COMPANY:

Sun City Center Outpatient Surgical Center, LLC

REGISTERED AGENT/OFFICE:

Max A. Adams, Esq.
The Medi-Law Firm
1400 N.W. 10TH Avenue
Penthouse III
Miami, Florida 33136

FILED
2009 DEC -7 AM 8:51
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I agree to act as registered agent to accept service of process for the company named above at the place designated in this Statement. I agree to comply with the provisions of all statutes relating to the proper and complete performance of the registered agent duties. I am familiar with and accept the obligations of the registered agent position.



Max A. Adams as attorney-in-fact

Date: 12/7/09

H09000253342