

Florida Department of State  
Division of Corporations  
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# H1100047649

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Division of Corporations  
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From:  
Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
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**FLORIDA LIMITED LIABILITY CO.  
SURGERY PARTNERS OF ORLANDO, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

**D. BRUCE**  
APR 22 2011  
**EXAMINER**

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**ARTICLES OF ORGANIZATION  
OF  
SURGERY PARTNERS OF ORLANDO, LLC**

The undersigned, being authorized to execute and file these Articles of Organization of **SURGERY PARTNERS OF ORLANDO, LLC** (the "Limited Liability Company"), hereby certifies that:

**ARTICLE I — Name:**

The name of the Limited Liability Company is:

**SURGERY PARTNERS OF ORLANDO, LLC**

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

5501 West Gray Street  
Tampa, Florida 33609

**ARTICLE III — Duration:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV — Registered Agent:**

The name and address of the registered agent for service of process in the state shall be:

CorpDirect Agents, Inc.  
515 East Park Avenue  
Tallahassee, Florida 32301

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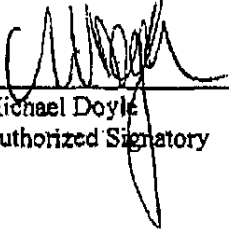
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ARTICLE V — Management:

The Limited Liability Company will be a manager-managed company.

ARTICLE VI — Indemnification

The Limited Liability Company shall indemnify and hold harmless its members and managers against any and all claims and demands whatsoever.

  
\_\_\_\_\_  
Michael Doyle  
Authorized Signatory

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**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT****SURGERY PARTNERS OF ORLANDO, LLC**

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with the obligations of my position as a registered agent as provided for in Chapter 608, F.S.*

CorpDirect Agents, Inc.

By: Michele Hord  
Print Name: Michele Hord  
Title: Assistant Sec.

Dated: April 21<sup>st</sup> 2011

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