

9/4/2020

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Email Address: LINDAB@JPFIRM.COMFLORIDA LIMITED LIABILITY CO.  
SPRING HILL ANESTHESIOLOGY, LLC

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**ARTICLES OF ORGANIZATION**  
**OF**  
**SPRING HILL ANESTHESIOLOGY, LLC**

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The undersigned authorized representative does hereby certify that the persons so identified herein have associated themselves together for the purpose of forming a limited liability company (the "*Company*") under the laws of the State of Florida.

**ARTICLE I**  
**NAME**

The name of the Company shall be: **Spring Hill Anesthesiology, LLC.**

**ARTICLE II**  
**ADDRESS AND PLACE OF BUSINESS**

The address of the principal office and the mailing address of this Company shall be:

**Principal Office**

3383 Barbour Trail  
Odessa, Florida 33556

**Mailing Address**

3383 Barbour Trail  
Odessa, Florida 33556

**ARTICLE III**  
**PERIOD OF DURATION**

The period of duration of the Company shall be perpetual.

**ARTICLE IV**  
**GENERAL POWERS**

The Company is formed for the purpose of conducting and undertaking, and shall have the power to conduct and undertake, any and all activities and actions authorized under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

**ARTICLE V**  
**MANAGEMENT**

All powers of the Company shall be exercised by or under the authority of the managers and, except as otherwise provided in the operating agreement of the Company, if any ("*Operating*

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*Articles of Organization  
Spring Hill Anesthesiology, LLC*

Agreement"). the business and affairs of the Company shall be managed by or under the direction of the managers. The initial manager shall be Bryan C. Yarnell.

**ARTICLE VI  
OPERATING AGREEMENT**

The members of the Company may adopt an operating agreement pertaining to the regulation, management, and other affairs of the Company (previously defined as the "Operating Agreement"), provided that such Operating Agreement shall not be inconsistent with these Articles of Organization or with the laws of the State of Florida. The Operating Agreement may be repealed or altered only in the manner now or hereafter prescribed therein, consistent with the laws of the State of Florida.

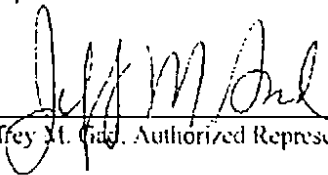
**ARTICLE VII  
REGISTERED OFFICE AND REGISTERED AGENT**

The street address of the Company's initial registered office in Florida is SunTrust Financial Center, 401 East Jackson Street, Suite 3100, Tampa, FL 33602 and the name of its initial registered agent is Jeffrey M. Gad, Esq. The Company may change its registered office or its registered agent or both by filing with the Department of State of the State of Florida a statement complying with Section 605.0114, Florida Statutes.

**ARTICLE X  
ACKNOWLEDGMENT**

The members of the Company, through their undersigned authorized representative, do hereby certify that the foregoing constitutes the proposed Articles of Organization of Spring Hill Anesthesiology, LLC. These Articles of Organization may be amended from time to time by consent of the members holding a majority of the voting interests of the Company, or otherwise in the manner now or hereafter prescribed in the Company's Operating Agreement, consistent with the laws of the State of Florida.

IN WITNESS WHEREOF, the undersigned authorized representative has executed these Articles of Organization effective as of the 4<sup>th</sup> day of September, 2020.

  
Jeffrey M. Gad, Authorized Representative

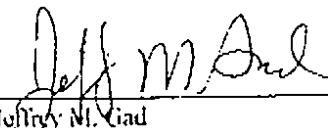
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*Spring Hill Anesthesiology, LLC*

**ACCEPTANCE BY REGISTERED AGENT**

Having been appointed the registered agent of **SPRING HILL ANESTHESIOLOGY, LLC**, the undersigned accepts such an appointment, agrees to act in such capacity and is familiar with and accepts the obligations set forth in Section 605.0113, Florida Statutes.

EXECUTED this 4<sup>th</sup> day of September, 2020.

  
\_\_\_\_\_  
Jeffrey M. Gaid

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