

6/2/2021

L21000257002

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.

(((H210002191973)))



H210002191973ABC%

**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)617-6381

## From:

Account Name : FISHER BROYLES, LLP  
Account Number : I20180000022  
Phone : (813)200-6114  
Fax Number : (813)402-0556

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

Email Address: Kevin Becker <kbecker@psychalthamerica.com>

## FLORIDA LIMITED LIABILITY CO.

## EHA Surgery Center Holdings, LLC

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

Electronic Filing Menu

Corporate Filing Menu

Help

2021 JUN -2 AM 9:12  
SEC. OF STATE  
TALLAHASSEE, FLORIDA

2021 JUN -2 PM 3:29

T. BURCH

JUN 3 2021

2021 JUN -2 AM 9:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
EHA SURGERY CENTER HOLDINGS, LLC**

The undersigned subscriber to these Articles of Organization, a natural person competent to contract, does hereby form a limited liability company under the laws of the State of Florida.

**ARTICLE I  
Name**

The name of the limited liability company shall be EHA SURGERY CENTER HOLDINGS, LLC.

**ARTICLE II  
Initial Principal Office Street and Mailing Address**

The Company's initial principal office street address and mailing address is 2111 Bee Ridge Road, Sarasota, FL 34239.

**Article III  
Period of Duration**

The limited liability company shall begin existence on the day of filing, and shall continue in perpetuity, or until dissolved in a manner provided by law or by regulation adopted by the Members of the limited liability company.

**Article IV  
Purposes**

The limited liability company may engage in the transaction of any or all lawful business for which limited liability companies may be formed under the laws of the State of Florida.

**Article V  
Registered Office and Registered Agent**

The street address of its initial registered office of the Company 2111 Bee Ridge Road, Sarasota, FL 34239, and the name of its initial registered agent at that address is John Swencki.

**Article VI  
Management**

The management of the limited liability company, unless otherwise provided in the articles of organization or the operating agreement, shall be vested in a Board of Managers.

**Article VII**  
**Authorized Representative**

The name and address of the authorized representative of the Company is:

**Name:**

John Swencki

**Address:**

2111 Bee Ridge Road  
Sarasota, FL 34239

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization  
the 31 day of May 2021.

A handwritten signature in black ink, appearing to read 'John Swencki', is written over a horizontal line.

John Swencki  
Authorized Representative

**ACCEPTANCE BY REGISTERED AGENT**

Having been named as registered agent and to accept service of process for the Company, at the place designated as the registered office, 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 duties and obligations of its position as registered agent.

Dated this 31 day of May 2021.

REGISTERED AGENT:

  
John Swencki

2021 JUN -2 AM 9:42  
STATE  
TALLAHASSEE, FLORIDA