**Document Number Only** 

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Requestor's Name : 660 East Jefferson Street								
Addr Ta	ess llahassee,	FL	32301	222-1092				
City	State		Zip	Phone				

**CORPORATION(S) NAME** 

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name**

The name of the Limited Liability Company Is:

Baptist Medical Park Surgery Center, L.C.

## ARTICLE II - Address

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

3 West Garden Street, Suite 700 Blount Building Pensacola, Florida 32501

#### **ARTICLE III - Duration**

The period of duration of the Limited Liability Company shall be:

Until December 31, 2050.

### **ARTICLE IV - Management**

The Limited Liability Company is to be managed by a manager or managers and the names and addresses of such managers are:

Robert Harriman Alfred G. Stubblefield Robert E. Van Slyke 1717 North E Street, Suite 320 Pensacola, Florida 32501

#### ARTICLE V - Registered Agent

The name and street address of the initial registered agent of the Limited Liability Company is:

J. Nixon Daniel, III3 West Garden Street, Suite 700Blount BuildingPensacola, Florida 32501

SECRETARY OF STATE
DIVISION OF CORPORATIONS

## **ARTICLE VI - Registered Office**

The street address of the initial registered office of the Limited Liability Company is:

3 West Garden Street, Suite 700 Blount Building Pensacola, Florida 32501

#### **ARTICLE VII - Additional Members**

The members shall be permitted to admit additional members pursuant to and in accordance with the terms and conditions contained in the Regulations of the company.

7 3 / 38 / 98 Dated	Signature of Member or Authorized Representative of Member		
Witness (. Cooley)		98 APR -3	SECRETARY DIVISION OF CO
REGISTERED AGENT ACCEPTANCE		PM 2: 00	OF STATE ORPORATIONS

Having been named as registered agent and to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of section 608.415, Florida Statutes, 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 and accept the obligations of my position as registered agent.

Dated J. Nixon Daniel III

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

Baptist Medical Park Surgery Center, L.C.

2. The name and address of the registered agent and office is:

J. Nixon Daniel IIIWest Garden Street, Suite 700Blount BuildingPensacola, Florida 32501

DIVISION OF CORPORATIONS

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in 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 and accept the obligations of my position as registered agent.

Dated

Baptist Medical Park Surgery Center, L.C.

By: J. Nixon Vaniel, in Its: Member

Dated

J. Nixon Daniel, III

FILING FEE: \$35 for Designation of Registered Agent

#### FLORIDA AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of Baptist Medical Park Surgery Center, L.C. a limited liability company deposes and says:

- 1. The above named limited liability company has at least two members. The two members shall initially include Baptist Health Ventures, Inc. and the registered agent, J. Nixon Daniel, III. Upon admission of the first Physician Class Member, the registered agent shall immediately withdraw from membership.
- 2. The total amount of cash contributed by the members(s) is \$1,000.
- 3. If any, the agreed value of property other than cash contributed by member(s) is \$ -0- A description of the property is attached and made a part hereto.
- 4. The total amount of cash or property anticipated to be contributed by member(s) is \$1,000,000. This total includes amounts from items two and three above and amounts to be contributed through investments upon completion of private offerings.

DIVISION OF CORPORATIONS

OR APR - 3 PM 2: 00

By:

Title: Ment or

(FLA. - LLC 3545 - 5/24/95) Ct System