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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**  
**Surgery Financing Partners, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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**D. BRUCE**  
DEC 30 2009  
**EXAMINER**

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**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. The name of the Foreign Limited Liability Company is:

SURGERY FINANCING PARTNERS, LLC

2. The Jurisdiction under the law of which the foreign limited liability company is organized is Delaware.

3. The FEI Number has been applied for.

4. The date of organization is December 28, 2009.

5. The duration of the limited liability company shall be perpetual.

6. The limited liability company has not transacted business in Florida prior to registration.

7. The street address of the Principal Office of the limited liability company is:

20283 State Road 7, Suite 109  
Boca Raton, Florida 33498

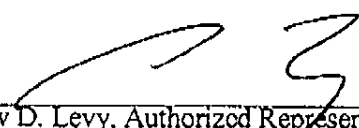
8. The limited liability company is member-managed.

9. The name and usual business address of the managing member is:

NEF Finance, LLC  
20283 State Road 7, Suite 109  
Boca Raton, Florida 33498

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized.

11. The Nature of business or purposes to be conducted or promoted in Florida is for investments.

  
\_\_\_\_\_  
Andrew D. Levy, Authorized Representative

Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes  
an affirmation under the penalties of perjury that the facts stated herein are true.)

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**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  
TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF  
FLORIDA.

1. The name of the Foreign Limited Liability Company is:

SURGERY FINANCING PARTNERS, LLC

2. The name and the Florida street address of the registered agent and office are:

NEF Finance, LLC  
20283 State Road 7, Suite 109  
Boca Raton, Florida 33498

*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 as provided for in Chapter 608, Florida Statutes.*

  
Andrew White, Authorized Representative

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# Delaware

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*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SURGERY FINANCING PARTNERS, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-NINTH DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SURGERY FINANCING PARTNERS, LLC" WAS FORMED ON THE TWENTY-EIGHTH DAY OF DECEMBER, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

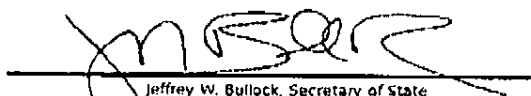
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Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 7726268

DATE: 12-29-09

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\*\* TOTAL PAGE.04 \*\*