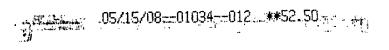
## P07000085756

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT M	AIL			
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: TREASURE COAST	SURGICAL CENTER, PA	
DOCUMENT NUMBER: P07000085756		
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	·
	•	
JOSEPH J. KATTA, MD	•	
	Contact Person)	<del></del>
TREASURE COAST SURGICAL CENT	ER, INC. / Company)	
· · ·	, company,	
18 () ≤ 25th ST		<u>.                                    </u>
· · · · · · · · · · · · · · · · · · ·	Address)	·
FT. PIERCE, FL 34947 (City/ State	e/ and Zip Code)	<u> </u>
· • • • • • • • • • • • • • • • • • • •		
For further information concerning this matter, pl	ease call:	,
JOSEPH J. KATTA, MD	at 772-429-5201	
(Name of Contact Person)	(Area Code & Daytime T	Telephone Number)
Turatara al in araba alla Santha dell'accione annocceti		
Enclosed is a check for the following amount:		
\$35 Filing Fee \$ Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	X \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Sect Division of Corpo 409 E. Gaines St	rations

Tallahassee, FL 32399

## Articles of Amendment to Articles of Incorporation of

TREASURE COAST SURGICAL CENTER, PA		
(Name of corporation as currently filed with the Florida Dept. of State)		
	•	
DOTODOGETEC		
P07000085756 (Document number of corporation (if known)		
(Document number of corporation (in thosair)		
Discount to the previous of continue 607 1006. Florida Statutos, this Elevida Profit Corporation		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i>		
adopts the following amendment(s) to its Articles of Incorporation:		
NEW CORPORATE NAME (if changing):		
TREACHRE COACT CHROICAL CENTER INC		
TREASURE COAST SURGICAL CENTER, INC.  (Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.")		
(A professional corporation must contain the word "chartered", "professional association," or the abbreviation "P.A.")		
AMENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article Number(s)		
and/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)		
ARTICLE I - CHANGE OF PHYSICAL AND BUSINESS ADDRESS TO:		
1811 S. 25TH ST, FORT Pierce, FL 34947		
	"	
<u> </u>	-	
5.7 S		
	П	
TO ST ST	O	
	<del></del>	
(Attach additional pages if necessary)		
If an amendment provides for exchange, reclassification, or cancellation of issued shares, provisio	ns	
for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/		
	,	

(continued)

TREASURE COAST SURGICAL CENTER, PA
------------------------------------

The date of each amendment(s	adoption:	5/1/2008	<del></del>
Effective date if applicable:		/2008	· · ·
(1	no more than 90 days at	ter amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)		
	• •	by the shareholders. The ras/were sufficient for app	
<del></del>	nust be separately p	y the shareholders throug rovided for each voting g	
"The number of v	otes cast for the am	endment(s) was/were su	fficient for approval by
		(voting group)	
The amendment(s) and shareholder act			vithout shareholder action
The amendment(s) very shareholder action we	•	y the incorporators witho	ut shareholder action and
Signed this day of MA	Υ .	, 2008	
Signature	M.		
selected		officer - if directors or officers he the hands of a receiver, trustery)	
JOSEPH	J. KATTA, MD		<u></u>
	(Typed or printe	ed name of person signing)	
PRESIDE			
	(Title o	of marage signing)	

FILING FEE: \$35