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.

(((H230001069113)))



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)617-6380

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.

Account Number : 076077001702 Phone : (407)841-1200 Fax Number : (407)423-1831

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

Email Address: <u>Ssantaniello@crcorlando.com</u>

MERGER OR SHARE EXCHANGE SURGICAL LICENSED WARD, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

Electronic Filing Menu Corporate Filing Menu

Help

(((H230001069113)))

ARTICLES OF MERGER

The following articles of merger are submitted in accordance with the Florida Business Corporation Act, pursuant to section 607.1105, Florida Statutes.

To:

FIRST: The name and jurisdiction of the surv	iving entity:						
Name	<u>Jurisdiction</u>	Entity Type	Document Number (if known/applicable)				
Surgical Licensed Ward, Inc.	Florida	Corp	P94000029685				
SECOND: The name and jurisdiction of each merging eligible entity:							
Name	Jurisdiction	Entity Type	Document Number (If known/applicable)				
Surgical Licensed Ward II, Inc.	<u>Florida</u>	Согр	P98000106372				
	<u></u>		ii.				
			N-4 10: 07				

THIRD: The merger was approved by each domestic merging corporation in accordance with s.607.1101(1)(b), F.S., and by the organic law governing the other parties to the merger.

• •			
Erom: Lestis Portyman	٠,	Eav.	14072329822

Fax: (850) 617-6380

Page: 3 of 4 03/21/2023 1:55 PM

(((H230001069113)))

To:

FOUR	TH: Please check one of the boxes that apply to surviving entity:			
	This entity exists before the merger and is a domestic filing entity.			
	This entity exists before the merger and is not authorized to transact business in Florida.			
	This entity exists before the merger and is a domestic filing entity, and its Articles of Incorporation are being amended as attached.			
	This entity is created by the merger and is a domestic corporation, and the Articles of Incorporation are a	attached.		
	This entity is a domestic eligible entity and is not a domestic corporation and is being amended in connecthis merger as attached.	ction with		
	This entity is a domestic eligible entity being created as a result of the merger. The public organic record survivor is attached.	of the		
	This entity is created by the merger and is a domestic limited liability limited partnership or a domestic liability partnership, its statement of qualification is attached.	imited		
FIFTE	1: Please check one of the boxes that apply to domestic corporations:			
Ø	The plan of merger was approved by the shareholders and each separate voting group as required.			
	The plan of merger did not require approval by the shareholders.	2023F: 3 2		
SIXTH	E: Please check box below if applicable to foreign corporations	- : - J ->		
	The plan of merger did not require approval by the shareholders. I: Please check box below if applicable to foreign corporations The participation of the foreign corporation was duly authorized in accordance with the corporation's organisms. STH: Please check box below if applicable to domestic or foreign non corporation(s).	ganic		
SEVEN	NTH: Please check box below if applicable to domestic or foreign non corporation(s).	ი 7		
	Participation of the domestic or foreign non corporation(s) was duly authorized in accordance with each eligible entity's organic law.			

(((H23000106911 3)))

	ing, the delayed effective date of the merger, which ca ent is filed by the Florida Department of State:	anot be prior to nor more
Note: If the date inserted in this block listed as the document's effective date	does not meet the applicable statutory filing requirem on the Department of State's records.	ents, this date will not be
NINTH: Signature(s) for Each Party: Name of Entity/Organization: Surgical Licensed Ward, Inc.	Signature(s):	Typed or Printed Name of Individual: Samuel DeJesus, M.D.
Surgical Licensed Ward II, Inc.		Samuel DeJesus, M.D.
Corporations:	Chairman, Vice Chairman, President or Officer	
General partnerships: Florida Limited Partnerships: Non-Florida Limited Partnerships: Limited Liability Companies:	(If no directors selected, signature of incorporator.) Signature of a general partner or authorized person Signatures of all general partners Signature of a general partner Signature of an authorized person	202312