2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000038278

Entity Name: SOUTH PALM AMBULATORY SURGERY CENTER, LLC

FILED
Apr 20, 2017
Secretary of State
CC2725279782

Current Principal Place of Business:

1905 CLINT MOORE RD. SUITE 115

BOCA RATON, FL 33496

Current Mailing Address:

1A BURTON HILLS BLVD NASHVILLE, TN 37215 US

FEI Number: 20-0313969 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC. 1200 SOUTH PINE ISLAND ROAD PLANATATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title MGR, SECRETARY Title PRESIDENT

NameGULMI, CLAIRENameCLENDENIN, PHILLIPAddress1A BURTON HILLS BLVDAddress1A BURTON HILLS BLVDCity-State-Zip:NASHVILLE TN 37215City-State-Zip:NASHVILLE TN 37215

Title MGRM

Name FO INVESTMENTS, INC.

Address 1A BURTON HILLS BLVD

City-State-Zip: NASHVILLE TN 37215

SIGNATURE: CLAIRE M GULMI

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

Electronic Signature of Signing Authorized Person(s) Detail

SEC 04/20/2017

Date