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STATE OF ILLINOIS)88 COUNTY OF COOK

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CERTIFICATE TO RECORD NAME AND OWNERSHIP OF

CHICAGO CARDIO-THORACIC & VASCULAR SURGERY ASSOCIATES, S.C.

The undersigned, being the President and Secretary of CHICAGO CARDIO-THORACIC & VASCULAR SURGERY ASSOCIATES, S.C. an Illinois corporation, do hereby present for public records, as required by the provisions of 805 ILCS 15/4, the following:

- That the name of the Corporation is CHICAGO CARDIO-THORACIC & VASCULAR SURGERY ASSOCIATES, S.C. and that the Corporation has been organized pursuant to the Medical Corporation Act of the State of Illino s;
- That the Corporation's principal place of business is located at 810 Biesterfield Road, Suite 204, Elk Grove Village, Illinois, 60007,
 - That the Shareholders of the Corporation as of the date hereof are

Dominic J. Tolítano, M.D. Henry J. Sullivan, M.D. Air ain Mariano, M.D. Alvare Montoya, M.D.

CHICAGO CARLIO THORACIC & VASCULAR SURGERY ASSOCIATES, S.C.

ATTEST

I, the undersigned, a Notary Public, do hereby certify that on the see the President and Secretary of CHICAGO CARDIO-THORACIC & VASCULAR SURGERY ASSOCIATES, S.C., personally appeared before me and being first duly sworn by me, acknowledged the signing of the foregoing document in their respective capacities therein set forth and declared that the statements therein are true, correct and complete.

IN WITNESS WHEREOF, I have hereunto set my hand and seal on the day and year above written.

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