

B1 (Official Form 1)(04/13)

United States Bankruptcy Court District of New Jersey		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): NJSR Surgical Center, LLC		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) 26-4007596		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 111 Wanaque Avenue Pompton Lakes, NJ <div style="text-align: right;">ZIP Code 07442</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right;">ZIP Code</div>
County of Residence or of the Principal Place of Business: Passaic		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input checked="" type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).	
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input checked="" type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): NJSR Surgical Center, LLC	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: - None -		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: - None -		Case Number:	Date Filed:
District:		Relationship:	Judge:
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). X _____ Signature of Attorney for Debtor(s) (Date)	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) _____ (Name of landlord that obtained judgment) _____ (Address of landlord) <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition
(This page must be completed and filed in every case)

Name of Debtor(s):
NJSR Surgical Center, LLC

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.
[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.
[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____
Signature of Debtor

X _____
Signature of Joint Debtor

Telephone Number (If not represented by attorney)

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.

Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____
Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Attorney*

X /s/ Ilissa Churgin Hook, Esquire
Signature of Attorney for Debtor(s)

Ilissa Churgin Hook, Esquire IC-6531
Printed Name of Attorney for Debtor(s)

Hook & Fatovich, LLC
Firm Name

1430 Route 23 North
Wayne, NJ 07470-5826

Address

ihook@hookandfatovich.com; mfatovich@hookandfatovich.com
(973) 686-3800 Fax: (973) 686-3801

Telephone Number

June 17, 2013
Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Address

X _____
Date

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Dr. Richard Kaul
Signature of Authorized Individual

Dr. Richard Kaul
Printed Name of Authorized Individual

Managing Member
Title of Authorized Individual

June 17, 2013
Date

B4 (Official Form 4) (12/07)

**United States Bankruptcy Court
District of New Jersey**

In re **NJSR Surgical Center, LLC**

Debtor(s)

Case No.

Chapter **11**

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Alphatec Spine 5818 El Camino Real Carlsbad, CA 92008	Alphatec Spine 5818 El Camino Real Carlsbad, CA 92008	Goods/services		18,905.00
Amendia 1755 West Oak Parkway Marietta, GA 30062	Amendia 1755 West Oak Parkway Marietta, GA 30062	Goods		148,865.00
Biomet Biologics, Inc. 56 E. Bell Drive P.O. Box 587 Warsaw, IN 46581-0587	Biomet Biologics, Inc. 56 E. Bell Drive P.O. Box 587 Warsaw, IN 46581-0587	Goods		5,066.65
Boston Scientific Corporation P.O. Box 8500-6205 Philadelphia, PA 19178	Boston Scientific Corporation P.O. Box 8500-6205 Philadelphia, PA 19178	Goods		29,850.05
Fortec Medical P.O. Box 951147 Cleveland, OH 44193	Fortec Medical P.O. Box 951147 Cleveland, OH 44193	Goods		8,769.72
Goldstein Partnership C/o Suarez & Suarez	Goldstein Partnership C/o Suarez & Suarez	J-307081-2010		33,589.14
Horizon Staff Resources 20 Jerusalem Ave, 3rd Fl Hicksville, NY 11801	Horizon Staff Resources 20 Jerusalem Ave, 3rd Fl Hicksville, NY 11801	Services		7,800.00
J.H. Cohen LLP 4 Becker Farm Rd Roseland, NJ 07068	J.H. Cohen LLP 4 Becker Farm Rd Roseland, NJ 07068	Accounting services		5,935.00
K2M 751 Miller Drive SE Suite F1 Leesburg, VA 20175	K2M 751 Miller Drive SE Suite F1 Leesburg, VA 20175	Goods		54,099.25
Karl Storz 2151 E. Grand Ave El Segundo, CA 90245	Karl Storz 2151 E. Grand Ave El Segundo, CA 90245	Services		8,955.97
LDR Spine USA Inc. P.O. Box 671716 Dallas, TX 75267	LDR Spine USA Inc. P.O. Box 671716 Dallas, TX 75267	Goods		104,336.00

B4 (Official Form 4) (12/07) - Cont.

In re **NJSR Surgical Center, LLC**

Case No. _____

Debtor(s) _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
McKesson P.O. Box 933027 Atlanta, GA 31193	McKesson P.O. Box 933027 Atlanta, GA 31193	Goods		10,295.90
Medtronic USA Bank of America Lock Box Services 4642 Collection Center Dr Chicago, IL 60693	Medtronic USA Bank of America Lock Box Services 4642 Collection Center Dr Chicago, IL 60693	Goods		56,730.83
Musculoskeletal Transplant Foundation P.O. Box 415911 Boston, MA 02241	Musculoskeletal Transplant Foundation P.O. Box 415911 Boston, MA 02241	Goods		19,866.47
New Jersey Spine & Rehabilitation PC 111 Wanaque Ave Pompton Lakes, NJ 07442	New Jersey Spine & Rehabilitation PC 111 Wanaque Ave Pompton Lakes, NJ 07442	Services		310,935.37
Paradigm Biodevices P.O. Box 518 Norwell, MA 02061	Paradigm Biodevices P.O. Box 518 Norwell, MA 02061	Goods		5,948.00
Pompton DME 756 Hamburg Tpke Pompton Lakes, NJ 07442	Pompton DME 756 Hamburg Tpke Pompton Lakes, NJ 07442	Goods		294,635.20
Spineology Inc. VB Box 119 P.O. Box 9202 Minneapolis, MN 55480	Spineology Inc. VB Box 119 P.O. Box 9202 Minneapolis, MN 55480	Goods		243,011.37
Stryker Orthobiologics P.O. Box 8500-1286 Philadelphia, PA 19178	Stryker Orthobiologics P.O. Box 8500-1286 Philadelphia, PA 19178	Goods		13,940.22
Zyga Technology 700 10th Ave - South Ste 20 Minneapolis, MN 55415	Zyga Technology 700 10th Ave - South Ste 20 Minneapolis, MN 55415	Goods		15,380.00

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the Managing Member of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date June 17, 2013

Signature /s/ Dr. Richard Kaul
Dr. Richard Kaul
Managing Member

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Airgas East
P.O. Box 827049
Philadelphia, PA 19182-7049

Alphatec Spine
5818 El Camino Real
Carlsbad, CA 92008

Amendia
1755 West Oak Parkway
Marietta, GA 30062

Biomet Biologics, Inc.
56 E. Bell Drive
P.O. Box 587
Warsaw, IN 46581-0587

Boston Scientific Corporation
P.O. Box 8500-6205
Philadelphia, PA 19178

Cadwell Laboratories, Inc.
909 North Kellogg Street
Kennewick, WA 99336

Department of Information Technology
25 Camelot Dr
Warwick, NY 10990

Fortec Medical
P.O. Box 951147
Cleveland, OH 44193

Gillen Surgical Company, LLC
220 Maple St
Haworth, NJ 07641

Goldstein Partnership
C/o Suarez & Suarez

Henry Schein, Inc.
Box 382023
Pittsburgh, PA 15250

Holtzquip Inc.
687 Humphries St SW
Atlanta, GA 30310

Horizon Staff Resources
20 Jerusalem Ave, 3rd Fl
Hicksville, NY 11801

Internal Revenue Service
Centralized Insolvency Operation
2970 Market Street
PO Box 7346
Philadelphia, PA 19101-7346

J.H. Cohen LLP
4 Becker Farm Rd
Roseland, NJ 07068

JSJ Consulting, LLC
6 North Synnott Ave
Wenonah, NJ 08090

K2M
751 Miller Drive SE
Suite F1
Leesburg, VA 20175

Karl Storz
2151 E. Grand Ave
El Segundo, CA 90245

LDR Spine USA Inc.
P.O. Box 671716
Dallas, TX 75267

McKesson
P.O. Box 933027
Atlanta, GA 31193

Medi-San Corp., Inc.
733 Ridgedale Ave
East Hanover, NJ 07936

Medline Industries, Inc.
P.O. Box 382075
Pittsburgh, PA 15251

Medtronic USA
Bank of America Lock Box Services
4642 Collection Center Dr
Chicago, IL 60693

Musculoskeletal Transplant Foundation
P.O. Box 415911
Boston, MA 02241

Neuro Therm INC.
30 Upton Dr
Ste 2
Wilmington, MA 01887

New Jersey Spine & Rehabilitation PC
111 Wanaque Ave
Pompton Lakes, NJ 07442

Orkin Pest Control
95 Lackawanna Avenue
Woodland Park, NJ 07424

Otis Elevator Company
P.O. Box 13898
Newark, NJ 07188

Paradigm Biodevices
P.O. Box 518
Norwell, MA 02061

Pompton DME
756 Hamburg Tpke
Pompton Lakes, NJ 07442

Pompton Transportation, LLC
111 Wanaque Avenue
Pompton Lakes, NJ 07442

Source Medical Solutions Inc.
100 Grandview Place
Ste 400
Birmingham, AL 35243

Spineology Inc.
VB Box 119
P.O. Box 9202
Minneapolis, MN 55480

State of New Jersey Division of Taxation
Division of Taxation - Bankruptcy Unit
50 Barrack Street, CN-245
Trenton, NJ 08646

Stericycle
P.O. Box 6582
Carol Stream, IL 60197

Stobezki, Zelitsky & Co., LLC
31-00 Broadway
Fair Lawn, NJ 07410

Stryker Instruments
P.O. Box
Chicago, IL 60673

Stryker Orthobiologics
P.O. Box 8500-1286
Philadelphia, PA 19178

T.D. Bank N.A.
c/o MEYNER AND LANDIS LLP
One Gateway Center, Ste 2500
Attn.: Jospheh McCarthy, Esquire
Newark, NJ 07102

TCD Consulting
8 Turnberry Lane
Hamburg, NJ 07419

United Airlines

Unitex Textile Rental
10A Van Dyke Ave
New Brunswick, NJ 08901

Verizon
PO Box 4833
Trenton, NJ 08650-4833

WB Mason
PO Box 111
Brockton, MA 02303

Zyga Technology
700 10th Ave - South
Ste 20
Minneapolis, MN 55415

**United States Bankruptcy Court
District of New Jersey**

In re **NJSR Surgical Center, LLC**

Debtor(s)

Case No.

Chapter

11

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **NJSR Surgical Center, LLC** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

None [*Check if applicable*]

June 17, 2013

Date

/s/ Ilissa Churgin Hook, Esquire

Ilissa Churgin Hook, Esquire IC-6531

Signature of Attorney or Litigant

Counsel for **NJSR Surgical Center, LLC**

Hook & Fatovich, LLC

1430 Route 23 North

Wayne, NJ 07470-5826

(973) 686-3800 Fax:(973) 686-3801

ihook@hookandfatovich.com; mfatovich@hookandfatovich.com