N98000006714

FLORIDA FILING & SEARCH SERVICES, INC P.O. BOX 10662 TALLAHASSEE, FL 32302 PHONE: (850) 668-4318 FAX: (850) 668-3398

DATE: 04-10-01

NAME: CHOICE HEALTH ALLIANCE, INC.

TYPE OF FILING: ARTICLES OF DISSOLUTION

10003984141---5

COST:

RETURN:

ACCOUNT: FCA00000015

G. COULLIETTE APR 1 0 2001

AUTHORIZATION:

ABBIE/PAUL HODGE

RECEIVED

01 APR 10 MID: 21

DIVISION OF CORPORATION

ARTICLES OF DISSOLUTION

Pursuant to section 617.1403, Florida Statutes, this Florida not for profit corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation is Choice Health Alliance, Inc.
SECOND: Adoption of dissolution (Complete Section I or II)
SECTION I If the corporation has members entitled to vote:
The date of the meeting of members at which the resolution to dissolve was adopted was
March le, 2001
(CHECK ONE)
☐ The number of votes cast for dissolution was sufficient for approval.
The resolution was adopted by written consent and executed in accordance with 617.0701, Florida Statutes.
SECTION II If the corporation has no members or members with voting rights:
The corporation has no members or members with voting rights.
The date of adoption of the resolution by the board of directors was
The number of directors in office was and the vote for the resolution
was for and against.
Signed this
Signature (By the Chairman or Vice Chairman of the Board, President or other officer)
Norm Stein Typed or printed name
President