MACFARLANE FERGUSON MCMULLEN

TEL:442 8470

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Division of Corporations

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

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Account Name

: MACFARLANE FERGUSON & MCMULLEN

Account Number : 071005001001

Phone

: (727)441-8966

Fax Number

: (727)442-8470

DISSOLUTION

WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A.

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WESTSIDE INTERNAL MEDICINE ASSOCIATES, 2010 59TH STREET WEST SUITE 5500 BRADENTON, FL 34209-4690 SUBJECT: WESTSIDE INTERNAL MEDICINE ASSOCIATES, We received your electronically transmitted document. However the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. Please correct your document to reflect that it is pursuant to the correct statute number. THE CORRECT STATUTE NUMBER IS 607.1403. The phone number of the preparer of the original document must be contained in the lower left-hand corner of the first page of the document. Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned. If you have any questions concerning the filing of your document, please call (850) 487-6880. FAX Aud. #: H99000012877 Letter Number: 199A00029556 Karen Gibson Corporate Specialist

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ENTER SELECTION AND CR:
May 28, 1999

WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A. 2010 59TH STREET WEST SUITE 5500 ______ BRADENTON, FL 34209-4690

SUBJECT: WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A. REF: 542155

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Section 15.16(3), Florida Statutes, requires each document to contain in the lower left—hand corner of the first page the name, address, and telephone number of the preparer of the original and, if prepared by an attorney licensed in this state, the preparer's Florida Bar membership number.

Please correct your document to reflect that it is filed pursuant to the correct statute number.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Karen Gibson Karen Gibson Letter Mulliber: Corporate Specialist

FAX Aud. #: H99000012877 Letter <u>Number: 699A00029503</u>

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ARTICLES OF VOLUNTARY DISSOLUTION OF CORPORATION

STATE OF FLORIDA COUNTY OF PINELLAS

We, the undersigned President and Secretary of WESTSTDE INTERNAL MEDICINE ASSOCIATES, P.A., a corporation organized under the laws of the State of Florida, do hereby, for the purposes of complying with the provisions of Florida Statute 607.1403(1987), in relation to the voluntary dissolution of a corporation, make and attest these Articles of Dissolution and attach hereto the written consent of the Shareholders of WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A. for dissolution and certify as follows:

- 1. The name of the Corporation is WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A. The Articles of Incorporation of said Corporation were filed in the office of the Secretary of State of Florida on the 1st day of November, 1972. Said Corporation desires to dissolve.
- 2. The names and addresses of the Officers and Directors of the Corporation are as follows:

MARC S. KALLINS, M.D. STEPHEN G. PELHAM, M.D.

- 3. All debts, obligations and liabilities of the Corporation have been paid, discharged or adequate provision has been made therefor.
- 4. All remaining property and assets of the Corporation have been distributed to the Shareholder, PINNACLE MEDICAL GROUP, P.A., in accordance with its respective rights and interests.
- 5. There are no actions pending against the Corporation in any court.
- 6. The Board of Directors and Shareholder of said Corporation in a meeting duly held and called for that purpose at the offices of Macfarlane Ferguson & McMullen, notice of such meeting being duly waived by each and all of the Directors and Shareholders by written waiver in writing and forming a part of the Minutes of said meeting, did, by unanimous vote of the whole Board and the Shareholder, adopt the following resolutions:

RESOLVE that in the judgment of this Board of Directors it is deemed desirable and advisable to dissolve this Corporation; and H990000128779

PREPARED BY AND RETURN TO:
EMIL C. MARQUARDT, JR., ESQ.
Macfarlane ferguson & McMullen
625 Court Street - 2nd floor.
Clearwater, FL 33756
[j. kl. Bar # 0092339
[727] 441-8966

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BE IT FURTHER RESOLVED, that the President and Secretary execute Articles of Dissolution showing the adoption of these resolutions and that they also attest the written consent of the Shareholder of the Corporation that the Corporation be dissolved and execute and verify all of the statements required by law to dissolve said Corporation pursuant to the provisions of Florida Statutes; and

MACFARLANE FERGUSON MCMULLEN

THAT the President and Secretary cause such Articles of Dissolution to be filed in the office of the Secretary of State; and

THAT the Officers and Directors of the Corporation take such further action as may be required to effectuate the dissolution of the Corporation and to wind up its business and affairs pursuant to provisions of Florida Statutes.

AND WHEREUPON, at said meeting, the owner and holder of the entire issued and outstanding stock of the Corporation did signify its consent, in writing, that such Corporation be dissolved by signing and executing the consent, which is affixed hereto and forms a part hereof.

IN WITNESS WHEREOF, we have made and executed these Articles of Dissolution this 27 day of __ APPILL , 1999.

WESTSIDE

MARC S

ASSOCIATES. P.

PELHAM, M.D., Secretary STEPHEN G.

STATE OF FLORIDA COUNTY OF PINELLAS

Attest:

I HEREBY CERTIFY, that on this day personally appeared before me, an officer duly authorized to administer oaths and take acknowledgments, MARC S. KALLINS, to me personally known or who has produced Personally KNOWN as identification, and known to me to be the individual described in and who executed the foregoing instrument and he acknowledged before me that he executed the same for the purposes therein expressed.

WITNESS my hand and official seal at MANATEE County and State, this 374 day of APRIL

Notary Print Name My Commission

INTERNAL

/KALLINS, President

MEDICINE

DEFICIAL NOTARY SEAL

PECCY A MILLARD NOTARY PUBLIC STATE OF FLORIDA COMMISSION NO. CC808509 MY COMMISSION EXP. FER. 11,2009

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CONSENT TO DISSOLVE

PINNACLE MEDICAL GROUP, P.A., as the only Shareholder of WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A., hereby consents to the action taken by the Board of Directors resolving to dissolve WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A.

Dated this 27 day of APAIL , 1999. PINNACLE MEDICAL GROUP, P.A. MARC'S. KYLLINS, M.D., President

The undersigned, being all of the Directors of WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A., acknowledge their written consent to the action taken by the Board of Directors_to dissolve WESTSIDE INTERNAL MEDICINE ASSOCIATES, P.A.

Dated this 27 day of April

PELHAM, M.D., Director