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REFERENCE

7119690

AUTHORIZATION

COST LIMIT

52.50

ORDER DATE: March 20, 2001

ORDER TIME :

3:49 PM

ORDER NO. : 084491-025

700003889897-

CUSTOMER NO:

7119690

CUSTOMER: Marcia K. Cox, Legal Asst

Pediatric Services Of America

310 Technology Parkway Norcross, GA 30092

DOMESTIC FILINGS

NAME:

PSA HOME HEALTHCARE, LIMITED

PARTERSHIP

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Angie Glisar - EXT# 1124

EXAMINER'S INITIALS:

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PSA HOME HEALTHCARE, LIMITED PARTNERSHIP

(Insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on _______, hereby submits this certificate of cancellation.

FIRST: Reason for cancellation: (State why partnership is submitting cancellation)

The Limited Partnership has been dissolved and the winding up of its affairs completed.

SECOND: This certificate of cancellation shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signatures of all general partners: Pediatric Partners, Inc. 310 Technology Parkway, Notices, GA 30092

Joseph D. Sansone, President