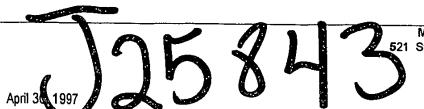
NEWMAN OB/GYN GROUP, P.A. OBSTETRICS, GYNECOLOGY & INFERTILITY

Willie B. Newman, M.D., J.D. Board certified by A.B.O.G. A.C.O.G. Fellow



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Division of Corporations PO BOX 6327 Tallahassee FL 32314

RE: Dissolution of WILLIE B NEWMAN, MD, P.A. FEI Number 59-2715673

Ladies, Gentlemen:

Enclosed is the necessary form to file the Articles of Dissolution for WILLIE B NEWMAN, MD, P.A.

Should you need anything further, please phone Dr. Newman or myself at (407) 830-4966.

Very truly yours,

Donna L Wilkins Business Manager

Business Man

100002166221--7 -05/05/97--01117--010 *****35.00 *****35.00

:dw

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation is: WILLIE B. NEWMAN, MD., P.A.
SECOND:	The date dissolution was authorized: April 15, 1997
THIRD:	Adoption of Dissolution (CHECK ONE)
	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
☐ Diss	olution was approved by vote of the shareholders through voting groups.
	the following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
·	(voting group)
•	day of
Signature	(By the Chairman or Vice Chairman of the Board, President, or other officer)
	, , , , , , , , , , , , , , , , , , , ,
	WILLIE B NEWMAN, MD, JD
	(Typed or printed name)
	President/Director (Title)