

**Surgical Specialty Services**  
*Specializing in Trauma, General and Vascular Surgery*  
Diplomates: American Board of Surgery

Forrest C. Haslup, M.D., F.A.C.S.  
N. Suzanne Lynn, M.D.

Nicholas W. Price, M.D., F.A.C.S.  
Richard P. Hodges, M.D.

K65470

September 12, 1997

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

200002295032--1  
-09/17/97--01008--002  
\*\*\*\*\*43.75 \*\*\*\*\*43.75

To Whom It May Concern:

Enclosed is form 311. Dissolution Profit Corp. I have also enclosed a check in the amount of \$43.75. Please let me know if further information is needed.

Sincerely,

*Forrest C. Haslup*  
Forrest C. Haslup, M.D.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPROVED  
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FILED

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*FL Div*  
*Central Sta*  
*9-17-97*  
*2 pg*

**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: FORREST C. HASLUP, M.D., P.A.

**SECOND:** The date dissolution was authorized: 12 SEPTEMBER 1997

**THIRD:** Adoption of Dissolution (CHECK ONE)

Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

Dissolution was approved by vote of the shareholders through voting groups.

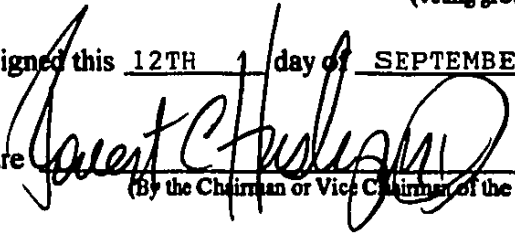
*The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:*

The number of votes cast for dissolution was sufficient for approval by

\_\_\_\_\_ (voting group)

Signed this 12TH day of SEPTEMBER, 19 97

Signature



PRESIDENT

(By the Chairman or Vice Chairman of the Board, President, or other officer)

FORREST C. HASLUP, M.D.

(Typed or printed name)

PRESIDENT

(Title)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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APPROVED  
AND  
FILED