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(Requestor's Name)

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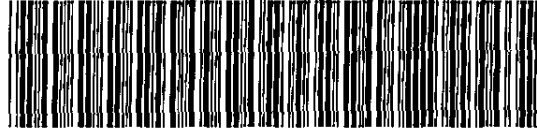
(Business Entity Name)

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Florida Department of State,

RESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned, **INTRASTATE REGISTERED AGENT CORPORATION**, hereby resigns as Registered Agent for **BOCA RATON AMBULATORY ANESTHESIA SERVICES, LLC**.

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date in which this statement is filed.

**INTRASTATE REGISTERED AGENT
CORPORATION**

By: *Frances G. Faigenblat*
Name: Frances G. Faigenblat
Title: Vice President

Date: 8-22-05

FEE FOR FILING THIS DOCUMENT:

\$85.00 - Active Limited Liability Company
**\$25.00 - Administratively Dissolved/Voluntarily Dissolved/Withdrawn
Limited Liability Company**

Make checks payable to Florida Department of State and mail to:
Division of Corporations - P.O. Box 6327 - Tallahassee, FL 32314

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