

LO1000014641

A. Azcuy M.D.  
9420 Beaucler Oaks Dr.  
Jacksonville, FL 32257

December 16, 2001

Department of State  
Division of Corporations.

100004730121--2  
-12/18/01--01029--010  
\*\*\*\*\*25.00 \*\*\*\*\*25.00

Ref: Dissolution of Integrated Healthcare Options LC. A Limited Liability Corporation.

Board agreed to dissolve the LLC in order to be incorporated as a non-profit organization. The Board decided to continue using the same name for the company.

The incorporation of Integrated Healthcare Options Inc, has been filed. They are waiting for the dissolution of Integrated Healthcare Options L.C. to finish the filing.

We greatly appreciate the expeditious transaction of this filing.

Sincerely



Arnold Azcuy M.D.  
Phone: 904-731-1838

FILED  
01 DEC 18 PM 3:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LO1-14641  
AK

**ARTICLES OF DISSOLUTION  
FOR  
A FLORIDA LIMITED LIABILITY COMPANY**

1. The name of the limited liability company is Integrated Healthcare Options LC.
2. The effective date of the limited liability company's dissolution is November 17, 2001
3. A description of the occurrence that resulted in the limited liability company's dissolution pursuant to 0section 608.441, Florida Statutes, (copy of 608.441 on back of cover letter).

Board decided to incorporate as a non-profit organization. The Board decided to dissolve Integrated Healthcare Options LC, before starting any business, to give room for the incorporation of Integrated Healthcare Options Inc, a non-profit organization.

**4. CHECK ONE:**

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.4421.

5. There is no assets or property to be distributed among its members.

**6. CHECK ONE:**

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree, which may be entered against it in any pending suit.

Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Typed or Printed name

Arnold Azcu M.D.

Jean Schnake.

*Jean Schnake*

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 DEC 18 PM 5:00

FILED

**Filing Fee: \$25.00**