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Florida Department of State
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC DISS/WITH OR REV DISS

PREMIER ANESTHESIA OF BOYNTON BEACH, LLC

Certificate of Status	1
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ARTICLES OF DISSOLUTION

OF

PREMIER ANESTHESIA OF BOYNTON BEACH, LLC

1. The name of the limited liability company is Premier Anesthesia of Boynton Beach, LLC (the "Company") and its document number is L07000008108.

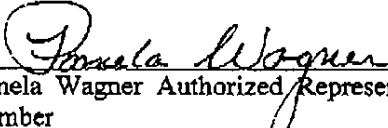
2. The effective date of this dissolution shall be the date these Articles of Dissolution are filed with the Florida Department of State.

3. The dissolution of the Company was approved by written consent of the member on August 1, 2007.

4. All debts, obligations, and liabilities of the Company have been paid or discharged.

5. All remaining property and assets have been distributed to its member in accordance with their rights and interests.

6. There are no suits pending against the Company in any court.


Pamela Wagner Authorized Representative of the
Member

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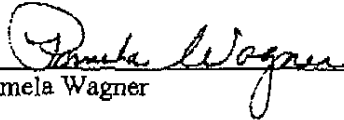
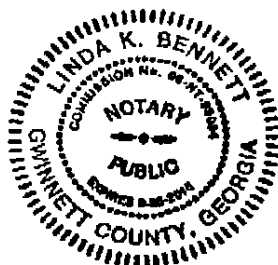
AFFIDAVIT

STATE OF GEORGIA
COUNTY OF FULTON

The undersigned, Pamela Wagner, being first duly sworn, deposes and says:

1. She is an authorized representative of Premier Anesthesia of Boynton Beach, LLC (the 'Company'), with full power and authority to execute the Articles of Dissolution of the Company and authorize the filing thereof with the Secretary of State of the State of Florida, and make the following covenants on behalf of the Company.
2. On behalf of the Company, the undersigned covenants that the Company will not revoke the Articles of Dissolution of the Company filed with the Florida Department of State.
3. On behalf of the Company, the undersigned hereby releases the name of Premier Anesthesia of Boynton Beach, LLC.
4. That the above statements are true to his knowledge, information and belief.

Date: August 1, 2007


Pamela WagnerFILED
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DIVISION OF CORPORATIONS
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COUNTY OF FULTONThe foregoing instrument was acknowledged before me this 1st day of August, 2007, by Michael Wagner, individually, who is personally known to me or who has produced a driver's license as identification.Name: Linda K. Bennett
NOTARY PUBLIC, State of Georgia
Commission Number: _____
Commission Expires: _____