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COVER LETTER

TO: Amendment Section

Division of Corporations	
SUBJECT: Disolutio	<u>~</u>
DOCUMENT NUMBER: P040009	2182
The enclosed Articles of Dissolution and fee are s	ubmitted for filing.
Please return all correspondence concerning this m	atter to the following:
DAvid K. (Name of Contact	ahmel
Specialty Bill, (Firm/Comp	ng Ihc.
P.O.Box/(Address)	175
(Address)	
Booksville	F) 34
Brooksville, (City/State and	Zip Code)
For further information concerning this matter, ple	ase call:
DAVID K. Duhmer a (Name of Contact Person)	t (_352) 232-/948 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	•
Certificate of Status Certificate Of Status (Add	2.75 Filing Fee & \$\Bigcup \\$52.50 Filing Fee, Certificate of Status & Certified Copy Closed) Certified Copy (Additional copy is enclosed)
MAILING ADDRESS: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

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 as currently filed with the Florida Department of State:
	Specialty Billing, Inc.
SECOND:	D \ / (0) \ O \ \ / C \
THIRD:	The date dissolution was authorized: $11/27/06$
	Effective date of dissolution if applicable: ///2>/ 0 6 (no more than 90 days after dissolution file date)
FOURTH:	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 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
	NIP EER & T
	(voting group)
	PM :: 10 OF STATE EE, FLORIDGE
,	Signature:
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)
	DAVID K DALMER
	(Typed or printed name of person signing)
	Parisi DENT
	(Title of person signing)

Filing Fee: \$35