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Division of Corporations

Fax Number : (850)205-0380

Account Name : DAVID E HIGHTOWER

Account Number : 120060000090 Phone

: (850)469-3307

Fax Number

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DISSOLUTION OR WITHDRAWAL

UNIVERSITY CENTER FOR INTERVENTIONAL PAIN MANAGEMENT

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3/29/2007

ARTICLES OF DISSOLUTION OF UNIVERSITY CENTER FOR INTERVENTIONAL PAIN MANAGEMENT, INC.

Pursuant to section 607.1403, Florida Statutes, this corporation submits these Articles of Dissolution.

FIRST: The name of the corporation is: University Center for Interventional Pain Management, Inc.

SECOND: The document number of the corporation is: P05000012158.

THIRD: The date dissolution was authorized: 3/26/67

FOURTH: Dissolution was approved by the shareholders. The number of votes cast for

Ву:

dissolution was sufficient for approval.

Executed this 24 day of Mann, 2007.

FILED 07MAR 29 AM 10: 38 AFLARASSEE, FLORID,

teff b. Buchalter, President

RESOLUTIONS OF THE SHAREHOLDERS AND BOARD OF DIRECTORS OF THE UNIVERSITY CENTER FOR INTERVENTIONAL PAIN MANAGEMENT, INC.

In lieu of a meeting of the shareholders and board of directors of University Center For Interventional Pain Management, Inc., a Florida corporation, ("Corporation") the undersigned, being all of the shareholders and directors of the Corporation, consent to the following resolutions:

RESOLVED, that the Corporation shall be dissolved and the net assets of the Corporation be distributed to the shareholders following the payment of the Corporation's liabilities.

RESOLVED, that the officers and directors of the Corporation are authorized and directed to take all actions necessary to carry out the foregoing resolutions.

IN WITNESS WHEREOF	, the undersigned shareholders and directors of the Corporation
have set their hands this day o	of
•	
•	Jeff Buchalter
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** · · · · · · · · · · · · · · · · · ·	David E. Fairleigh
•	
<i>;</i>	Kurt A. Kriigger