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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : AKERMAN, SENTERFITT OF JACKSONVILLE

Account Number : 105543000740 Phone : (904)798-3700 Fax Number

| Phone Fax Num | : (904)798-3700<br>ber : (904)798-3730 |                   |     |
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## ARTICLES OF DISSOLUTION

## THE HARRIS CLINIC and PONTE VEDRA AGE MANAGEMENT CENTER, P.A.

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:

The name of the corporation is The Harris Clinic and Ponte Vedra Age

Management Center, P.A.

SECOND:

THIRD:

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

dissolution was sufficient for approval.

Signed this 18 day of April, 2007.

THE HARRIS CLINIC and PONTE VEDRA AGE MANAGEMENT CENTER, P.A. a Florida corporation

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