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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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2006 JAN 18 PM 2: 01 06 JAN 18 MIN 25
TÄLLAHASSEE, FLORIDA DIVISION OF CLAFFORNION

C. Coulliatte JAN 1 8 2006

LAZARUS CORPORATE FILING SERVICE

CORPORATE FILING SERVICE		
3320 SW 87 TH AVENUE		
MIAMI, FL 33165 (305) 552-5973		
	Office Use Only	
CORPORATION NAME(S) & DOCUMENT NU	MBER(S), (if known):	
1. CAROMEDICAL CEN	TER CORP	
2. (Corporation Name)	(Document #)	
3.	(Document #)	
	(Document #)	
4. (Corporation Name)	(Document #)	
Walk in Pick up time 2.06	Certified Copy	
Mail out Will wait Photo	ocopy	
NEW FILINGS AMEN	<u>DMENTS</u>	
	endment	
	Resignation of R.A., Officer/Director ity Change of Registered Agent	
Domestication Dis	solution/Withdrawal rger	
OTHER FILINGS REGIST	FRATION/QUALIFICATION	
	eign nited Partnership	
Rei	nstatement	
Oth	demark er	

Examiner's Initials

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Fic:ida 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:		
	CABO MEDICAL CENTER COB	P		
SECOND:	The document number of the corporation (if known): P.05000152223			
THIRD:	The date dissolution was authorized:			
	Effective date of dissolution if applicable: (no more than 90 days after dissolution	on file date)		
FOURTH:				
	Dissolution was approved by the shareholders. The number of votes cas was sufficient for approval.	t for dissolution		
	Dissolution was approved by of the shareholders through voting groups			
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled		
	The number of votes cast for dissolution was sufficient for approval by	.		
		2006, SEUK		
	(voting group)	HA.		
·	Signed this 47 day of AWUARY 2006	JAN 18 PH 2: LARY OF STATE HASSEE, FLORI		
	Simulation And American	ATE O		
	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)			
	Jorge CATO			
	To bg & CRbo (Typed or printed name of person signing)			
	PRE O'GENTE (Title of person signing)			

Filing Fee: \$35