

P95000025206

TRANSMITTAL LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: American Surgery Centers of Sarasota, Inc.  
(Name of corporation)

DOCUMENT NUMBER: P95000025206

500007978995--9  
-09/24/02--01029--006  
\*\*\*\*\*35.00 \*\*\*\*\*35.00

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Isabel Mahmood  
(Name of Person)

Physicians Resource Group  
(Firm/Company)

5005 Riverway, Suite 400  
(Address)

Houston, TX 77056  
(City/State and Zip code)

For further information concerning this matter, please call:

Isabel Mahmood at ( 713 ) 629-5777  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET ADDRESS:**  
Amendment Section  
Division of Corporations  
409 E. Gaines St.  
Tallahassee, FL. 32399

**MAILING ADDRESS:**  
Amendment Section:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL. 32314

FILED  
02 SEP 24 PM 1:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

all 9/30  
dissol

**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 is: American Surgery Centers of  
Sarasota, Inc.

SECOND: The date dissolution was authorized: 9/9/02

THIRD: Adoption of Dissolution (CHECK ONE)

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

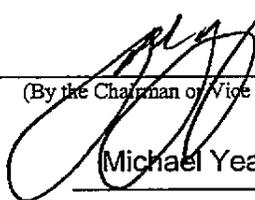
Dissolution was approved by vote of the shareholders through voting groups.

*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

\_\_\_\_\_  
(voting group)  
Signed this 9th day of September, 2002

Signature \_\_\_\_\_  
(By the Chairman or Vice Chairman of the Board, President, or other officer)

  
Michael Yeary  
(Typed or printed name)

President  
(Title)

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