

P960000/6298



ACCOUNT NO. : 072100000032

REFERENCE : 393444 4390339

AUTHORIZATION :

Patricia Pizzit

COST LIMIT : \$ 35.00

ORDER DATE : September 30, 1999

ORDER TIME : 11:40 AM

ORDER NO. : 393444-005

CUSTOMER NO: 4390339

CUSTOMER: Ms. Tina Nelson
Medpartners, Inc.
3000 Galleria Tower
Suite 1000
Birmingham, AL 35244

500003001695-5

DOMESTIC FILINGS

NAME: MEDPARTNERS MANAGED CARE OF
SOUTH BROWARD, INC.

FILED
99 SEP 30 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Reynolds

EXAMINER'S INITIALS:

RECEIVED
99 SEP 30 PM 12:54
SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

OR
9/30/99

ARTICLES OF DISSOLUTION

FILED
99 SEP 30 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FIRST: The name of the corporation is: MedPartners Managed
Care of South Broward, Inc.

SECOND: The date dissolution was authorized: September 28, 1999

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 _____ day of September, 19 99.

Signature _____

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

C. Clark Wingfield, Jr.

(Typed or printed name)

Vice President

(Title)