## 200050942

May 17, 1999

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Department of State:

Please accept this letter and the attached form as a request for dissolution of the corporation "Medsource Management, Inc." which was formed in June 1997. I am the sole officer and shareholder and have enclosed a check for the appropriate fees of \$52.50.

My return address and phone numbers are as follows:

Yolanda C. Velazquez 375 Douglas Ave Suite 2015 Altamonte Springs, Fl 32714 407-786-0990 - work 407-265-0300 - home

WHY 20 HH 9: 3'

Should you have any questions please contact me at the above listed numbers or address. I look forward to receiving a certified copy of the dissolution and a certificate of status.

Thank you for your assistance and attention to this matter!

Sincerely, olanda C. Velazque

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## **ARTICLES OF DISSOLUTION**

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## FILED

99 MAY 20, AM 9: 32

SECRETARY OF STATE TALLAHASSEE, FLORIDA following articles of dissolution:

FIRST:	The name of the corporation is: Medsource Management, Inc
SECOND:	The date dissolution was authorized: $5 - 14 - 99$
THIRD:	Adoption of Dissolution (CHECK ONE)
	olution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.
🗖 Diss	olution was approved by vote of the shareholders through voting groups.
	he following statement must be separately provided for each voting group ntitled to vote separately on the plan to dissolve:
The	number of votes cast for dissolution was sufficient for approval by
	VOLANDA C. VELAZQUEZ
	(voting group)
Signe	d this day of May, 1999
Signed this day of May, 19 Signature (By the Chairman or Vice Chairman of the Board, President, or other officer)	
	(By the Chairman or Vice Chairman of the Board, President, or other officer) /o/4ND4 C. Velazquez (Sole owner/shareholker) (Typed or printed name)
	(Typed or printed name)
	President / GO
	(Title)