2624 Victory Blvd. Vero Beach, Florida 32960

Fax 413/785-1327 Home Phone 413/785-1327 Email TAlixCRNA@yahoo.com

P99000029847

August 31, 2000

Ms. Anna Chestnut Florida Dept. of State / Division of Corporations PO Box 6327 Tallahassee, FL 32314 500003387625--6 -04/20/00--90042--048 ****150.00 *****35.00

RE: P99000029847

Ref Dep# 04/20/0090042048

Fed ID # 650907312

Dear Anna,

Thank you for taking time to speak to me on August 24th about dissolving my corporation. As I explained at that time I had missed the deadline to add my federal ID number to my Business Report which I had submitted on April 6th along with the \$150.00 fee. My business has been inactive since I accepted a position as employee in a hospital on January 1, 2000. Since I would have to pay an additional fee to correct this oversight and since my business is inactive, I am instead choosing to voluntarily dissolve the corporation.

I am authorizing you, as a representative of the Division of Corporations to use \$35.00 of the \$150.00 I have already paid. I would therefore request a refund of \$115.00 made to me, Trudy Alix. I understand it may take up to 60 days before I receive the refund. My current address is 45 Willow St, #225, Springfield, MA 01103. I would appreciate it if you could have that refund mailed to me here.

I have filled out and submitted articles of dissolution with Section 607.1403. I believe everything to be in order. If there is anything else I need to do, please contact me at the above phone or email address. It was a pleasure speaking with you last week, Anna. Best Wishes to you in Florida.

Sincerely,

Trudy Alix, Principal

Alix Anesthesia Services, Inc.

SECRETARY OF STATE OF

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DIVISION OF CORPORATION

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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: HUTX HNESTHESIA	. :
, .	SERVICES, INC.	
	The date dissolution was authorized: $08/31/00$	-
THIRD:	Adoption of Dissolution (CHECK ONE)	
	solution was approved by the shareholders. The number of votes cast for dissolution sufficient for approval.	
☐ Disa	solution was approved by vote of the shareholders through voting groups.	
T es	The following statement must be separately provided for each voting group antitled to vote separately on the plan to dissolve:	
The	number of votes cast for dissolution was sufficient for approval by	
	BOARD OF DIRECTURS (voting group)	
	(voting group)	
Sig	gned this 31 day of $August$, 1000	
Signature _	Judy Alix, CRUA	
	(By the Chairman or Vice Chairman of the Board, President, or other officer)	
	Tanan Aliv agua	
	Typed or printed name)	. =:-
÷	THE DAY FRESIDENT	<u>.</u>
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