## P99000050135

(Re	questor's Name)	
(Ad	dress)	-
(Ad	dress)	
(Cit	:y/State/Zip/Phone	o #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
, (Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



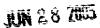


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The Radiology Services Company

May 23, 2005

## <u>Via FedEx</u>

Florida Department of State Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

RE: Dissolution of:

Questar Atlanta, Inc. - P99000050135 Questar Columbus, Inc. - P99000033887 Questar Lower Bucks, Inc. - P98000055820 Questar Naperville, Inc. - P99000048174 Questar Quakertown, Inc. - P98000046699 Questar Toledo, Inc. – P98000055835 Questar TriStates, Inc. - P98000104412

Dear Sir or Madam:

Enclosed for filing are Articles of Dissolution for each of the above referenced companies, together with our check payable for the applicable filing fees in the aggregate amount of \$245.00.

After filing each of the enclosed Articles of Dissolution, please return file stamped copies to me in the enclosed self-addressed envelope that has been provided for your convenience.

Respectfully submitted,

rejce Williams Joyce Williams Legal Assistant 214.303.2870

joyce.williams@radiologix.com

Enclosures:

## ARTICLES OF DISSOLUTION

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

FIRST: The nan	ne of the corporation is: Questar Atlanta, Inc.		
SECOND: The	date dissolution was authorized: December 31, 2004		
THIRD: Adoption	on of Dissolution (CHECK ONE)		
区	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 ntitled to vote separately on the plan to dissolve:		
Т	he number of votes cast for dissolution was sufficient for approval by		
-	(voting group)		
Signed th	nis 23rd day of May, 2005.		
Signature	(By the Chairman or Vice Chairman of the Board, President, or other officer)		
	Michael L. Silhol		
	(Typed or printed name)  ARC JUN T		
	Senior Vice President  (Title)  Senior Vice President  ORT 2		
	ATE ATE		