

STATE OF ALABAMA

DOMESTIC LIMITED LIABILITY COMPANY ARTICLES OF DISSOLUTION GUIDELINES

INSTRUCTIONS:

STEP 1: FILE ORIGINAL AND TWO COPIES WITH THE JUDGE OF PROBATE IN THE COUNTY WHERE THE ORIGINAL ARTICLES OF ORGANIZATION WERE FILED. ATTACH SECRETARY OF STATE AND JUDGE OF PROBATE FEES. THE JUDGE OF PROBATE'S FILING FEE IS \$5 AND THE SECRETARY OF STATE'S FILING FEE IS \$10.

PURSUANT TO THE PROVISIONS OF THE ALABAMA LIMITED LIABILITY COMPANY ACT AND SECTION 10-12-37 OF THIS ACT, THE UNDERSIGNED DOMESTIC LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING ARTICLES OF DISSOLUTION.

- Article I The name of the limited liability company:
Gastroenterology Specialists of AL, LLC
- Article II The date of filing of the articles of organization: 3.12.96
- Article III The reason for filing the articles of dissolution: Company is no longer in business with no assets or liabilities
- Article IV The dissolution was authorized by written consent of all members and effective on
Sept 15, 1999
- Article V Attach other information the members or managers filing the articles of dissolution deem appropriate.

8.13.01
Date

Douglas S. Dickinson
Type or Print Member's Name and Title
Douglas S. Dickinson
Signature of Authorized Member

ALABAMA SECRETARY OF STATE

FILING CLERK: JACKIE FRAZIER

**DOMESTIC CORPORATIONS
CORPORATIONS DIVISION
DOCUMENT RETURN**

DATE: 1/18/2001

Gastroenterology Specialists of Alabama, LLC
THE ATTACHED DOCUMENT OR A COPY OF THE DOCUMENT IS BEING RETURNED BECAUSE IT DOES NOT MEET THE FILING REQUIREMENTS. IF YOU HAVE ANY QUESTIONS, PLEASE CONTACT THE CORPORATIONS DIVISION AT 334/242-5324.

____ INSUFFICIENT FILING FEE, FEE EXCEEDS AMOUNT DUE OR FILING FEE NOT INCLUDED.

ADDITIONAL FEES NEEDED \$ _____

TOTAL FEES DUE \$ _____

____ THE JUDGE OF PROBATE DATE & TIME STAMP DOES NOT APPEAR ON THE DOCUMENT, PLEASE AFFIX THE DATE & TIME STAMP TO THE DOCUMENT AND RETURN TO OUR OFFICE FOR RECORDING.

____ YOU ARE REQUIRED TO FILE THE ATTACHED DOCUMENT IN THE JUDGE OF PROBATE'S OFFICE WHERE YOUR ARTICLES OF INCORPORATION ARE ON FILE.

____ WE HAVE NO RECORD THAT A CORPORATION EXIST BASED ON THE ATTACHED DOCUMENT, PLEASE PROVIDE THIS OFFICE WITH A CERTIFIED COPY OF THE ARTICLES OF INCORPORATION, ANY SUBSEQUENT AMENDMENT FILED ON BEHALF OF THE CORPORATION, AND RETURN WITH ATTACHED DOCUMENT FOR RECORDING IN OUR OFFICE.

____ THE LEGISLATION AUTHORIZING THE FILING OF THE ATTACHED DOCUMENT HAS BEEN REPEALED.

____ PLEASE FILE ON BEHALF OF THE ATTACHED FOR-PROFIT CORPORATION ARTICLES OF CORRECTION TO WHERE YOUR ARTICLES OF INCORPORATION ARE FILED CORRECTING THE FOLLOWING:

____ A POST OFFICE BOX IS NOT SUFFICIENT FOR SERVICE OF PROCESS, PLEASE FILE ARTICLES OF CORRECTION WITH THE JUDGE OF PROBATE CHANGING THE REGISTERED AGENT'S ADDRESS TO A STREET ADDRESS WITH CITY, STATE & ZIP.

____ ADD THE NAME AND/OR STREET LOCATION OF THE REGISTERED AGENT AND REGISTERED OFFICE.

____ ADD THE WORDS "INCORPORATED," "CORPORATION" OR THE ABBREVIATIONS "INC." OR "CORP." TO YOUR CORPORATE NAME.

____ THE NUMBER OF SHARES OF STOCK AUTHORIZED TO BE ISSUED BY YOUR CORPORATION, IT CANNOT BE ZERO.

____ SPECIFY THE PURPOSE(S) FOR WHICH YOUR CORPORATION WAS ORGANIZED.

____ ADD THE NAME(S) AND ADDRESS(ES) OF INCORPORATOR(S).

____ OTHER _____

____ PLEASE FILE ON BEHALF OF THE ATTACHED NON-PROFIT CORPORATION ARTICLES OF AMENDMENT WHERE YOUR ARTICLES OF INCORPORATION ARE FILED AMENDING THE FOLLOWING:

____ ADD THE NAME AND/OR STREET LOCATION OF THE REGISTERED AGENT AND REGISTERED OFFICE.

____ ADD THE NAMES AND ADDRESSES OF THE DIRECTORS.

____ ADD THE NAME(S) AND ADDRESS(ES) OF INCORPORATOR(S).

X OTHER please complete the attached Dissolution and file in
uplicate form in Probate Judge's office. Thanks,

J. Frazier

Bookout, Peyton & Company, P.C.

Certified Public Accountants

5300 Cahaba River Road
P.O. Box 43265
Birmingham, Alabama 35243
Telephone (205) 967-0101
Facsimile (205) 967-0401

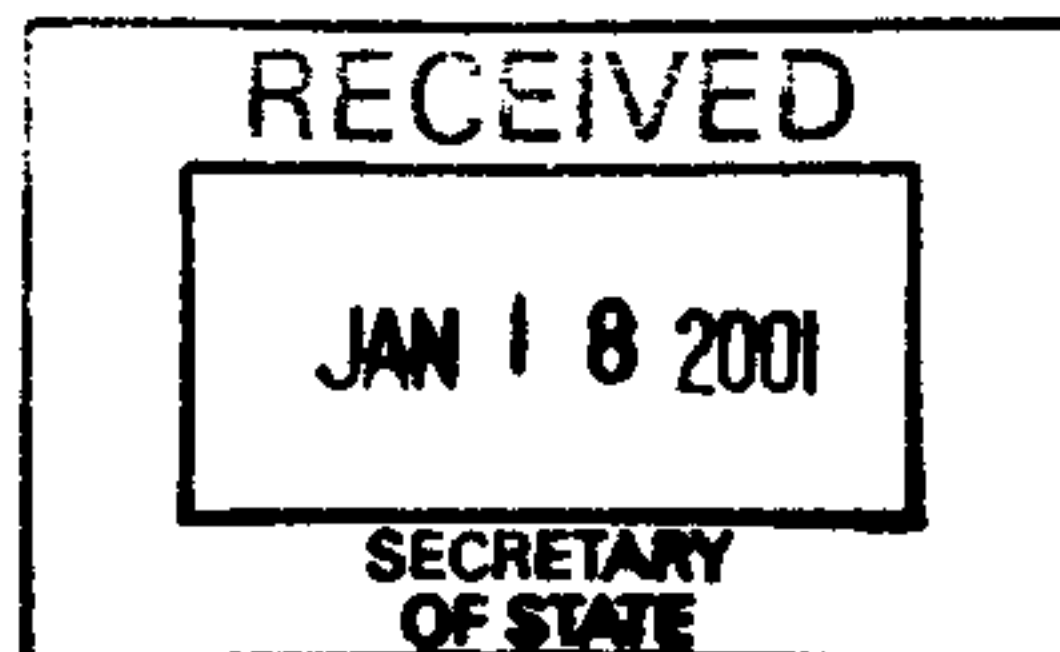
January 15, 2000
Secretary of State
Corporate Division
PO Box 5616
Montgomery, AL 36103

Rc: Gastroenterology Specialists of Alabama. LLC
Account Number 631161531

This entity ceased all operations in 1999 and has no assets. The members are in agreement to let the state dissolve the entity. Should you have any questions, please contact me at this address.

Very truly yours,


J. Steven Bookout





MICHAEL PATTERSON
Commissioner

STATE OF ALABAMA DEPARTMENT OF REVENUE

Montgomery, Alabama 36132

(www.ador.state.al.us)

GEORGE E. MINGLEDORFF III
Assistant Commissioner

LEWIS A. EASTERLY
Secretary

NOTICE TO FILE TAX RETURN

GASTROENTEROLOGY SPECIALISTS OF ALABAMA LLC
STE 626
2022 BROOKWOOD MEDICAL CTR DR
BIRMINGHAM AL 35209-6808

ACCOUNT NUMBER: 631161531

Our records indicate that you have not filed a Business Privilege Tax Return, Corporate Shares Tax Return and Annual Report (Form PSA) for the year 2000 as required under Title 40, Chapter 14A, Code of Alabama 1975. The return was due March 15, 2000 for corporations or April 15, 2000 for limited liability entities. Businesses that are inactive must continue to pay the tax and file a return unless they have taken the appropriate legal action through the Secretary of State's Office or Judge of Probate's Office to cease their existence in the State of Alabama prior to the first day of their tax year.

You must complete the return (Form PSA) which was previously sent to you and forward it to this office immediately with your remittance for payment of the tax, penalty and interest due. Additional returns may be obtained through our web site www.ador.state.al.us.

Failure to comply will result in revocation of your authority to conduct business or administrative dissolution of your business, as applicable, and the assessment of additional penalties and interest.

Alabama Department of Revenue
Business Privilege Tax Section
PO Box 327431
Montgomery AL 36132-4731
(334)353-7923

Inst # 2001-35597

08/20/2001-35597
03:39 PM CERTIFIED
SHELBY COUNTY JUDGE OF PROBATE
004 MSB 20.00