

STATE OF ALABAMA)
SHELBY COUNTY)

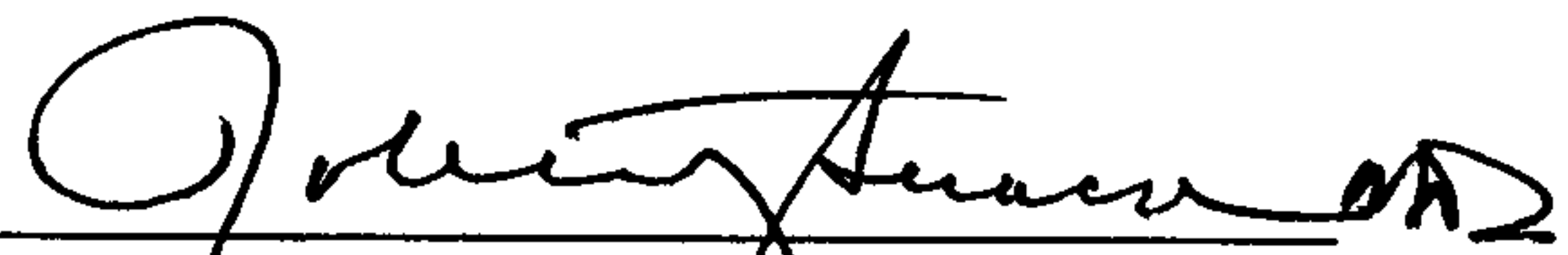
**ARTICLES OF DISSOLUTION OF
ALABAMA ENT ASSOCIATES, P.C.**

Pursuant to the provisions of Section 10A-2-14.03 of the 1975 *Code of Alabama*, the undersigned corporation adopts the following Articles of Dissolution for the purpose of dissolving the corporation:

1. The name of the corporation is **Alabama ENT Associates, P.C.**
2. Dissolution was authorized by the shareholders on the 12th day of October, 2012.
3. Dissolution was approved by the written consent of the shareholders pursuant to §10A-2-14.02(f), 1975 *Code of Alabama*, and a copy of said consent is attached hereto as Exhibit "A."
4. No debt of the corporation remains unpaid.
5. The net assets of the corporation remaining after winding up have been distributed to the shareholder(s).

DATED: The 12th day of October, 2012.

Alabama ENT Associates, P.C.


By: Robert J. Sciacca
Its: President

Attest:

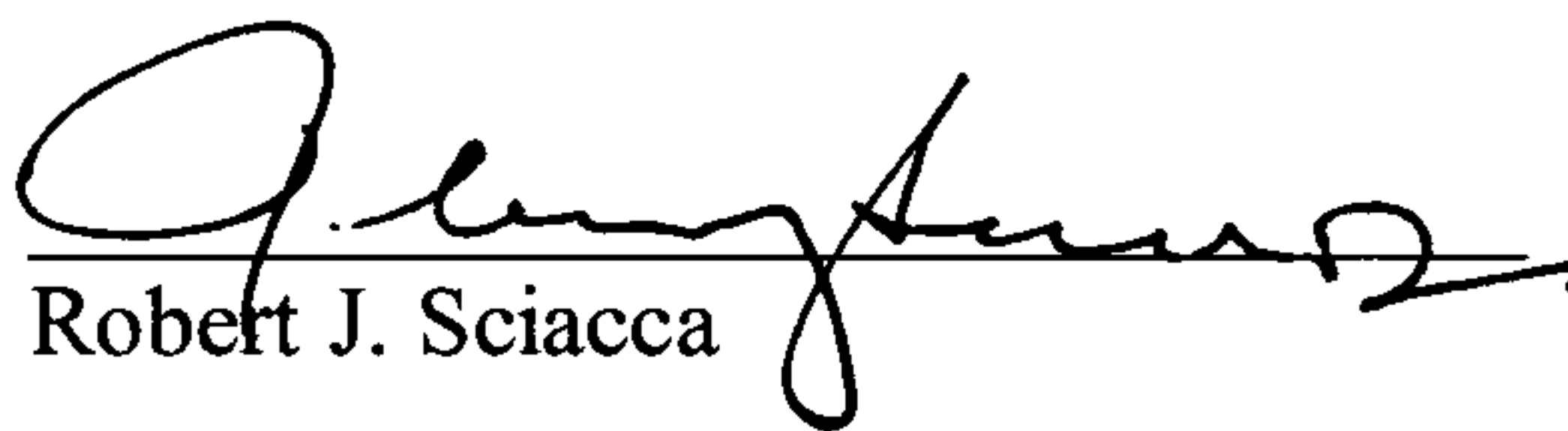

Secretary


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Shelby Cnty Judge of Probate, AL
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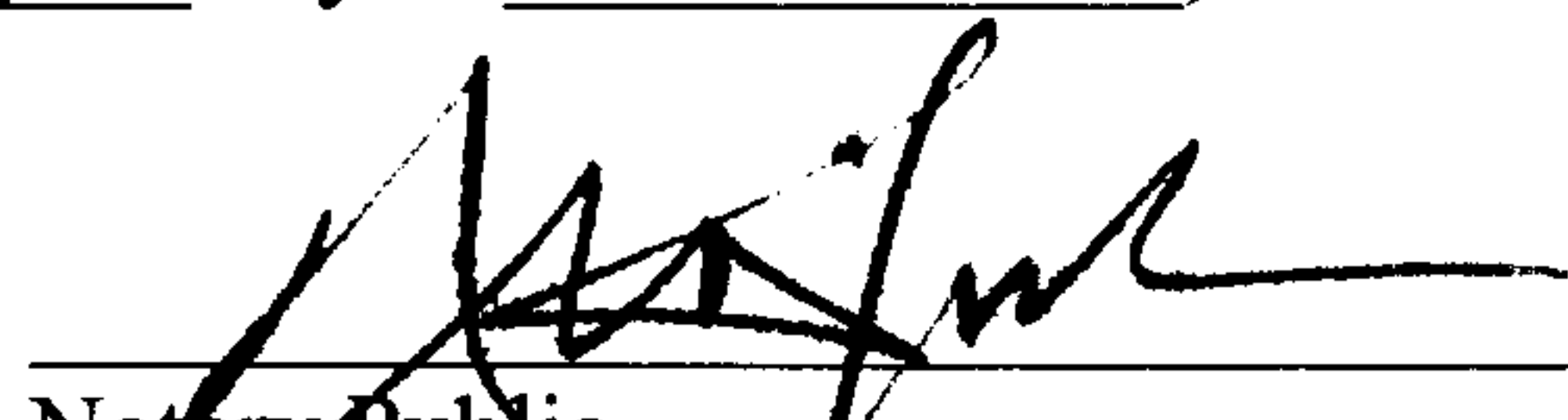
VERIFICATION

STATE OF ALABAMA
SHELBY COUNTY

I, Robert J. Sciacca, hereby verify that I have read the foregoing Notice of Articles of Dissolution and the statements contained therein are true and correct and I have signed my name thereto as President of Alabama ENT Associates, P.C. and with full authority to does so, voluntarily on this the 12th day of OCTOBER, 2012.


Robert J. Sciacca

Sworn to and subscribed before me this the 12th day of OCTOBER, 2012.


Notary Public
My Commission Expires: 2.3.16
A. Eric Johnston



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STATE OF ALABAMA)
SHELBY COUNTY)

**CONSENT TO DISSOLUTION OF
ALABAMA ENT ASSOCIATES, P.C.**

Robert J. Sciacca does hereby solemnly swear that he is shareholder of 1,000, as of the 12th day of OCTOBER, 2012, and does hereby consent to the voluntary dissolution of the corporation according to Section 10A-2-14.02(f) of the 1975 *Code of Alabama*.

Further, he does hereby consent to the distribution of the assets to him after payment of legal debts.

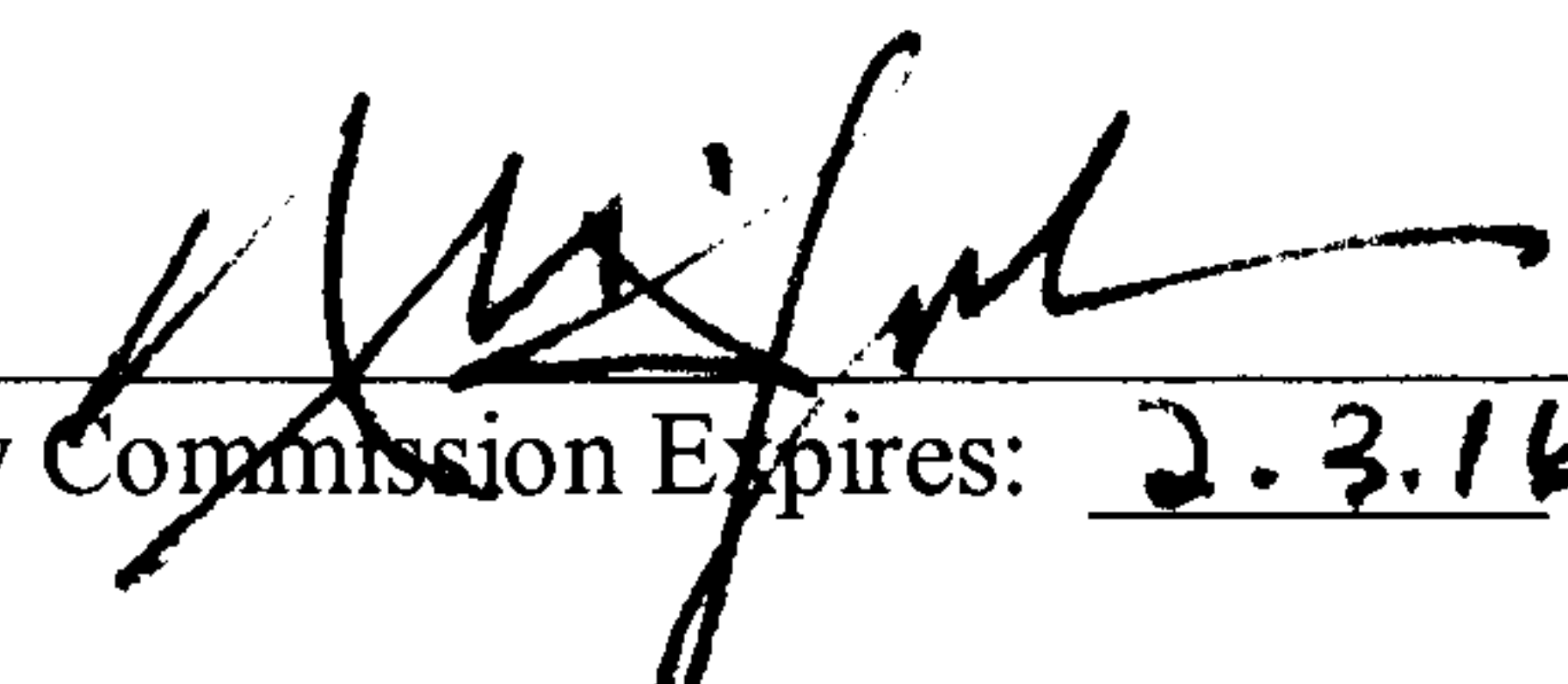
Dated this the 12th day of OCTOBER, 2012.


Robert J. Sciacca

STATE OF ALABAMA)
COUNTY OF SHELBY)

I, A. Eric Johnston Notary Public, in and for said County in said State, hereby certify that Robert J. Sciacca, whose name is signed to the foregoing instrument, and who is known to me, with authority, acknowledged before me on this day that, being informed of the contents of the instrument, he executed the same voluntarily on the day the same bears date.

Given under my hand and Official Seal this the 12th day of OCTOBER, 2012.


My Commission Expires: 2.3.16



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