

## CERTIFICATE OF TERMINATION OF LIMITED PARTNERSHIP

(instructions on back of application)

FILED EFFECTIVE

07 OCT 23 AM 8: 08

SECRETARY OF STATE STATE OF IDAHO

1.	The name of the limited partnership is:
	Kavon Medical Group, L.P.
2.	The date its certificate of limited partnership was filed with the Secretary of State: 9-14-2006
3.	This limited partnership [  is ] [  is not ] a limited liability limited partnership.
4.	The limited partnership having been dissolved and having completed the winding up of business hereby cancels its certificate of limited partnership.
5.	Other matters (optional):
6.	Signatures of all general partners or remaining limited partners:
Sic	gnature
_	ped Name Kristina Harrington, M.D.
	Osterla M. Ma
_	gnature / MWW 4 & W.D.
Ту	ped Name Patrick Dwyer, M.D.  Secretary of State use only
Siç	gnature
Ту	ped Name Olurotimi A. Ashaye, M.D.
	ped Name Olurotimi A. Ashaye, M.D.  gnature Fric A. Simmons, D.O.  IDAHO SECRETARY OF STATE 10/23/2007 05:0  CK: 19177 CT: 199132 BH: 1981

L5716