## 487374

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## , COVER LETTER

TO: Amendment Section Division of Corporations SUBJECT: \_\_\_\_\_\_ Dastgir, M.D., P.A. DOCUMENT NUMBER: The enclosed Articles of Dissolution and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Joe M. Chambers (Name of Contact Person) Johnston Hinesley PC (Firm/Company) PO Box 2246 (Address) Dothan, AL 36302 (City/State and Zip Code) For further information concerning this matter, please call: Joe M. Chambers (Area Code) (Daytime Telephone Number) (Name of Contact Person) Enclosed is a check for the following amount: □ \$35 Filing Fee □ \$43.75 Filing Fee & ■ \$43.75 Filing Fee & □ \$52.50 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (Additional copy is Certified Copy (Additional copy is enclosed) enclosed) Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations Division of Corporations The Centre of Tallahassee P.O. Box 6327

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

EFFECTIVE DATE

## 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 as currently filed with the Florida Department of State:  Ghulam Dastgir, M.D., P.A.  The document number of the corporation (if known):  487374		
SECOND:			
THIRD:	The date dissolution was authorized: November 30, 26	020	
	Effective date of dissolution <u>if applicable</u> : December 31, 2020  (no more than 90 days after dissolution file date)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.		
FOURTH:	Dissolution was approved by the shareholders, in the manner required by this chapter and the articles of incorporation.		
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		PH 1: 02	
	Signature:   9. MS+gir mp lyesident  (By a director, president or other officer - if directors or officers have an incorporator - if in the hands of a receiver, trustee, or other court ap that fiduciary)	not been selected, by opointed fiduciary, by	
	Ghulam Dastgir  GHULAM DASTGIR MD  (Typed or printed name of person signing)	PRESIDENT	
	Durid us and Sala Shambuldus 00	OLE Shareholder.	

Filing Fee: \$35

## **Notice of Corporate Dissolution**

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution. Name of Corporation: \_\_\_\_\_ Ghulam Dastgir, M.D., P.A. The above named corporation is the subject of dissolution and the effective date of a dissolution is: December 31, 2020 (date filed with the Dept. (f date specified in the Articles of Dissolution) Description of information that must be included in a claim: Any claim must be in writing, and must specify (i) the name, mailing address and telephone number of the claimant, (ii) the amount of the claim, (iii) the date the claim was incurred, and (iv) a description of the nature of the claim with any supporting documents enclosed. Mailing address where written claims can be sent: (Claims cannot be sent to the Division of Corporations) G. David Johnston, Esq. Johnston Hineslev PC Post Office Box 2246 Dothan, Alabama 36302 claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced ithin 4 years after the filing of this notice. GHULAM DASTGIR, MD

Printed Name of the Person Hing.

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00

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