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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Maria Cuesta  
Advised Making  
the correction on  
the Adoption

Office Use Only



800293300348

12/20/16--01019--001 \*\*35.00

FILED  
2016 DEC 30 PM 12:27

Rev. of Diss

DEC 30 2016  
I ALBRITTON

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** RHYTHM OF SOUTH FLORIDA, INC.

**DOCUMENT NUMBER:** P00000060060

The enclosed *Articles of Revocation of Dissolution* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

ABU S CHOWDHURY

Name of Contact Person

RHYTHM OF SOUTH FLORIDA INC

Firm/Company

4076 SW 69th Ave

Address

MIRAMAR, FL 33023

City/State and Zip Code

miamiman881@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ABU S CHOWDHURY

Name of Contact Person

At ( 954 ) 554-9007

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee,  
Certificate of Status &  
Certified Copy  
(Additional copy is enclosed)

**Mailing Address:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 22, 2016

ABU S CHOWDHURY  
RHYTHM OF SOUTH FLORIDA, INC.  
4076 SW 69TH AVE  
MIRAMAR, FL 33023

SUBJECT: RHYTHM OF SOUTH FLORIDA, INC.  
Ref. Number: P00000060060

We have received your document for RHYTHM OF SOUTH FLORIDA, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The Revocation of Dissolution must be adopted in the same manner as the Articles of Dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 116A00027228

## ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is: RHYTHM OF SOUTH FLORIDA INC

SECOND: The document number of the corporation (if known) is P00000060060

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution

filed with the Florida Department of State is 12/16/2016

**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: The Revocation of Dissolution was authorized on 12/16/2016

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☒ The board of directors revoked the dissolution.
- ☐ The incorporators revoked the dissolution.
- ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☐ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.
- ☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by

\_\_\_\_\_ was sufficient for approval.  
(Voting group)

SIXTH: A copy of the Articles of Dissolution is attached.

Signature   
(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

ABU S CHOWDHURY

(Typed or printed name of person signing)

President, Director

(Title of person signing)

**FILING FEE \$35**

## **ARTICLES OF DISSOLUTION**

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

- FIRST:** The name of the corporation as currently filed with the Florida Department of State:  
RHYTHM OF SOUTH FLORIDA, INC.
- SECOND:** The document number of the corporation: P00000060060
- THIRD:** The file date of the articles of incorporation: June 21, 2000
- FOURTH:** None of the corporation's shares have been issued.  
The corporation has not commenced business.
- FIFTH:** No debt of the corporation remains unpaid.
- SIXTH:** The net assets of the corporation remaining after winding up have been distributed to the shareholders, if shares were issued.
- SEVENTH:** A majority of the directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ABU S CHOWDHURY PRESIDENT  
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

**FILED**  
**Oct 28, 2016**  
**Secretary of State**

## **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.

Name of Corporation:

RHYTHM OF SOUTH FLORIDA, INC.

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the Articles of Dissolution.

Description of information that must be included in a claim:

THIS BUSINESS HAD BEEN CLOSED.

Mailing address where claims can be sent:

16897 SW 51 STREET  
MIRAMAR, FL 33027 US

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ABU S CHOWDHURY

Electronic Signature of the Person Filing