

PD10000066967

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

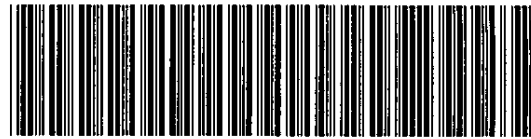
(Business Entity Name)

(Document Number)

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

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07/14/14--01056--004 \*\*35.00

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SECRETARY OF STATE  
14 AUG 13 AM 9:23

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10 8.14.14

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** TLC Non-Emergency Medical Transport Inc

**DOCUMENT NUMBER:** P01000066967

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

Please return all correspondence concerning this matter to the following:

Jorge F Balleto

(Name of Contact Person)

(Firm/Company)

P.O. Box 110808

(Address)

NAPLES FL 34108

(City/State and Zip Code)

For further information concerning this matter, please call:

Jorge F Balleto

(Name of Contact Person)

at ( 239 )

825-8226

(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

July 29, 2014

JORGE F. BARRETO  
TLC NON-EMERGENCY MEDICAL TRANSPORT INC  
P.O. BOX 110808  
NAPLES, FL 34108

SUBJECT: TLC NON-EMERGENCY MEDICAL TRANSPORT, INC.  
Ref. Number: P01000066967

We have received your document for TLC NON-EMERGENCY MEDICAL TRANSPORT, 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 application/form submitted does not meet the requirements of this office; please complete the attached application/form.

It appears you wish to dissolve the corporation.

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: 014A00016207

RECEIVED  
14 AUG 13 PM 2:38  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

## ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, 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:

TLC Non-Emergency Medical Transport Inc

SECOND: The document number of the corporation (if known): 701000066967

THIRD: The file date of the articles of incorporation: 07/09/2001

FOURTH: (CHECK AT LEAST ONE BOX)

☒ 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: Adoption of Dissolution (CHECK ONE)

☒ A majority of the incorporators authorized the dissolution.

☐ A majority of the directors authorized the dissolution.

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.)

JORGE F BARRITO

(Typed or printed name of person signing)

PRESIDENT

(Title of Person Signing)

Filing Fee: \$35

FILED  
CLERK OF STATE  
14 JUL 13 AM 9:00