

P02000086578

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

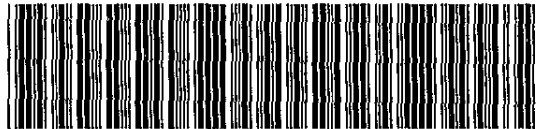
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05 JUL 18 PM 3:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Diss w/notice

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: E-MEDICO CORP

DOCUMENT NUMBER: P02000086548

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

Please return all correspondence concerning this matter to the following:

VINCENZA MARCELLO
(Name of Person)

E-MEDICO CORP
(Name of Firm/Company)

2005 PARKSIDE S
(Address)

BOCA RATON, FL 33486
(City/State/and Zip Code)

For further information concerning this matter, please call:

X MIRLO VIETHI at (561) X 866-3718
(Name of Person) (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, Florida 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

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:

E-MEDICO CORP

SECOND: The document number of the corporation (if known): P 02000086578

THIRD: The file date the articles of incorporation: 11-24-2003

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.

Signed this 8th day of JULY, 2005.

Signature: X Miro Vietti President

(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.)

X MIRO VIEHTI

(Typed or printed name of person signing)

X PRESIDENT

(Title of person signing)

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TALLAHASSEE, FLORIDA

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: E-MEDICO CORP

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:

NAME ADDRESS PHONE NUMBER OF CLAIMANT
DATE OF INDEBTEDNESS
REASON FOR CLAIM
MONETARY VALUE
ALL PREVIOUS CORRESPONDENCE FOR RESOLUTION

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

MIRCO VIETHI
2005 PARKSIDE S
BOCA RATON, FL 33486

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TALLAHASSEE, FLORIDA

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.

x MIRCO VIETHI
Printed Name of the Person Filing

x Mirco Viethi
Signature of the Person Filing