

P06000111565

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

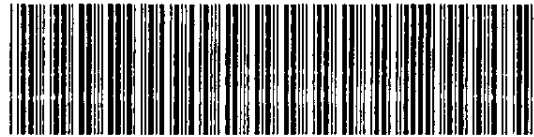
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/24/11--01029--009 **35.00

11 APR 15 AM 11:16

FILED

Vodis
W/ Notice
DC
4-19-11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 28, 2011

ENRIQUE LAMELAS
E.A.L. MEDICAL TRANSPORTATION, CORP.
18731 N.W. 89TH PL.
HIALEAH, FL 33018

SUBJECT: E.A.L. MEDICAL TRANSPORTATION, CORP.
Ref. Number: P06000111565

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must state either: (1) None of the corporation's shares have been issued OR (2) The corporation did not commence business.

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) 245-6906.

Darlene Connell
Regulatory Specialist II

Letter Number: 111A00007485

RECEIVED
11 APR 15 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ARTICLES OF DISSOLUTIONS

DOCUMENT NUMBER: 65-1294461

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

Please return all correspondence concerning this matter to the following:

ENRIQUE LAMELAS

(Name of Contact Person)

E.A.L. MEDICAL TRANSPORTATION, CORP.

(Firm/Company)

18731 NW 89TH PL.

(Address)

HIALEAH, FL 33018

(City/State and Zip Code)

For further information concerning this matter, please call:

ENRIQUE LAMELAS

(Name of Contact Person)

X at (305) 824-3653
(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

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.A.L. MEDICAL TRANSPORTATION, CORP.

SECOND: The document number of the corporation (if known): P06000111565

THIRD: The file date of the articles of incorporation: 08/25/2006

FOURTH: (CHECK AT LEAST ONE BOX)

☒ None of the corporation's shares have been issued.

☐ The corporation has not commenced business.

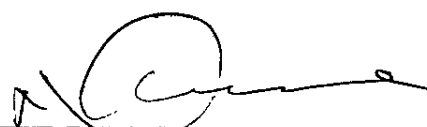
FIFTH: No debt of the corporation remains unpaid.

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.)

ENRIQUE LAMELAS

(Typed or printed name of person signing)

DIRECTOR

(Title of Person Signing)

Filing Fee: \$35

11 APR 15 AM 11:16

FILED

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.A.L. MEDICAL TRANSPORTATION, 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:

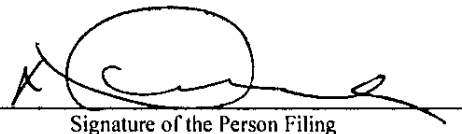
THE CORPORATION STOPPED DOING BUSINESS SINCE LAST YEAR(2010)

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

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.

ENRIQUE LAMELAS

Printed Name of the Person Filing


Signature of the Person Filing

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