

P09 000054604

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

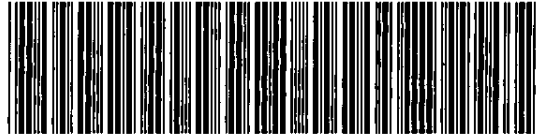
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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10 NOV 16 PM 1:47
SECRETARY OF STATE
DALLAS, TEXAS

VALID/INACTIVE WITH
notice
KES
11/18



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 28, 2010

ANTONIO LOPEZ
T & M REHAB MANAGEMENT
733 85 STREET
MIAMI BEACH, FL 33141-1109

SUBJECT: T&M REHAB MANAGEMENT, INC.
Ref. Number: P09000054604

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

Articles of Dissolution must comply with either section 607.1401 or 607.1403, Florida Statutes.

The fee to file articles of dissolution or a certificate of withdrawal is \$35. Certified copies are optional and are \$8.75 for the first 8 pages of the document, and \$1 for each additional page, not to exceed \$52.50.

We are enclosing the proper form(s) with instructions for your convenience.

If you have any questions concerning the filing of your document, please call (850) 245-6880.

Karen Gibson
Document Specialist Supervisor

Letter Number: 810A00025509

RECEIVED
10 NOV 16 AM 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

10 OCT 25 AM 8: 02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

October 20, 2010

Florida Department of State
Division of Corporations

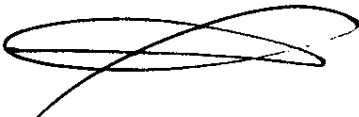
To whom it may concern:

I, Antonio Lopez, am writing you this letter because I want to close my corporation since it is not functioning. We have not had any profit in this corporation and that is why I want to make it inactive. I will provide you with all my company information below:

Company Name:	T & M Rehab Management, Inc.
Principal Address:	733 85 Street
	Miami Beach, FL 33141-1109

Thank you for your attention. If you need any further information you can contact me at the address shown above.

Sincerely,

A handwritten signature in black ink, consisting of a series of loops and a long horizontal stroke, positioned above the printed name.

Antonio Lopez

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:

T&M Rehab Management, Inc.

SECOND: The document number of the corporation (if known): P-09000054604

THIRD: The file date of the articles of incorporation: 06-23-2009

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: [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.)

Antonio Lopez

(Typed or printed name of person signing)

President

(Title of Person Signing)

FILED
10 NOV 16 PM
SECRETARY OF STATE
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: T & A Ruelas Management, LLC

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:

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

Division of Corporations
P.O. Box 6327
Tallahassee FL 32314

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.

Antonio Lopez / President
Printed Name of the Person Filing

[Signature]
Signature of the Person Filing

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