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DIVISION OF CORPORATIONS
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Ahmed Osman, M.D., P.A.

DOCUMENT NUMBER: P09000058656

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

Please return all correspondence concerning this matter to the following:

Catherine Belanger
(Name of Contact Person)

Florida Heart Rhythm Specialists, P.C.
(Firm/Company)

350 NW 84th Ave Suite 110
(Address)

Plantation, Florida 33324
(City/State and Zip Code)

For further information concerning this matter, please call:

Catherine Belanger at (954) 678-9531
(Name of Contact 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, 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

February 4, 2011

CATHERINE BELANGER
FLORIDA HEART RHYTHM SPECIALISTS, PLLC
350 NW 84TH AVE #110
PLANTATION, FL 33324

SUBJECT: AHMED OSMAN, M.D., P.A.
Ref. Number: P09000058056

We have received your document for AHMED OSMAN, M.D., P.A. and your check(s) totaling \$52.50. 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.

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) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 611A00003075

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SECRETARY OF STATE
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:

Ahmed Osman, M.D., P.A.

SECOND: The document number of the corporation (if known): PO9000058056

THIRD: The file date of the articles of incorporation: 7/7/2009

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: _____

(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.)

Ahmed Osman, M.D.
(Typed or printed name of person signing)

Incorporator
(Title of Person Signing)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 FEB 17 AM 8:51

Filing Fee: \$35