

P11000071687

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please****

Email Address: _____

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
JABAL UFFELMAN, M.D., P.A.**

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$35.00

91640

less with notice

AJR
3/27/15

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FILED

2015 MAR 26 PM 12:07

FLORIDA

RECEIVED
15 MAR 26 PM 5:00

FLORIDA

COVER LETTER

HIS20070420

TO: Amendment Section
Division of Corporations

SUBJECT: DISSOLUTION OF CORPORATION

DOCUMENT NUMBER: P11000071687

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

Please return all correspondence concerning this matter to the following:

MAX A. ADAMS ESQ

(Name of Contact Person)

LAW OFFICES OF MAX A ADAMS ESQ PLLC

(Firm/Company)

325 ALMERIA AVENUE

(Address)

CORAL GABLES, FLORIDA 33134

(City/State and Zip Code)

For further information concerning this matter, please call:

ANGELA PEREZ

(Name of Contact Person)

at (305) 444-3484

(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

FILED

2015 MAR 26 PM 12:07

Pursuant to section 607.1403, 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:

JABAL UFFELMAN, M.D., P.A.

SECOND: The document number of the corporation (if known): P11000071687

THIRD: The date dissolution was authorized: 03/10/2015

Effective date of dissolution if applicable: 03/10/2015

(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group entitled to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

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)

JABAL UFFELMAN

(Typed or printed name of person signing)

PRESIDENT/DIRECTOR

(Title of person signing)

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: JABAL UFFELMAN, M.D., P.A.

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:

IF ANY OPEN INVOICES, NUMBER OF INVOICE, NAME OF VENDOR OR PROVIDER, DATE OF INVOICE

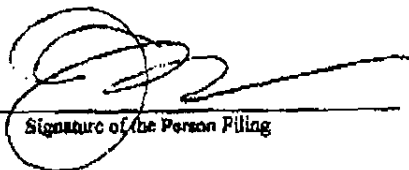
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1218 W. LAS OLAS BLVD
FORT LAUDERDALE, FL. 33312

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.

JABAL UFFELMAN

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