

P130000013336

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

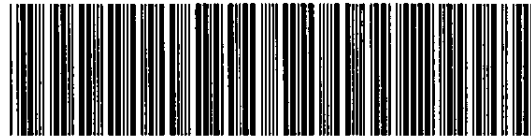
(Business Entity Name)

(Document Number)

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STATE
TALLAHASSEE
14 JUL 22 PM 3:34

Revocation of Dissolution

JUL 25 2014

T. CARTER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BIOMEDIZIN USA

DOCUMENT NUMBER: P13000013336

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

Please return all correspondence concerning this matter to the following:

Antonio Nicolas Fernandez

Name of Contact Person

BIOMEDIZIN USA

Firm/Company

13506 Summerport Village Pkwy Suite 811

Address

Windermere, Florida 34786

City/State and Zip Code

biomedizinusa@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

A. Nicolas Fernandez

Name of Contact Person

At (407) 8102234

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

June 23, 2014

ANTONIO NICOLAS FERNANDEZ
BIOMEDIZIN USA
13506 SUMMERPORT VILLAGE PKWY, STE 811
WINDERMERE, FL 34786 US

SUBJECT: BIOMEDIZIN USA INC
Ref. Number: P13000013336

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

The articles of revocation of dissolution must be accompanied by a copy of the previously filed articles of dissolution.

Our records indicate that the subject corporation has not filed their current year annual report. Enclosed is an annual report form which must be completed and returned with the Articles of Revocation of Dissolution to the address at the bottom of this letter. The annual report filing fee is \$150 for a profit corporation and \$61.25 for a not for profit corporation

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) 245-6050.

Tina D Carter
Regulatory Specialist

Letter Number: 714A00013560

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

FIRST: The name of the corporation is: BIOMEDIZIN USA

SECOND: The document number of the corporation (if known) is P13000013336

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution filed with the Florida Department of State is 02/28/2014

FOURTH: The Revocation of Dissolution was authorized on 04/13/2014

FIFTH: Adoption of Revocation of Dissolution (check one)

- ☒ The board of directors revoked the dissolution.
- ☐ The incorporators revoked the dissolution.
- ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization.
- ☐ The shareholders revoked the dissolution and the number of votes cast was sufficient for approval.
- ☐ The shareholders revoked the dissolution by voting groups - the number of votes cast by _____ was sufficient for approval.

(Voting group)

SIXTH: A copy of the Articles of Dissolution is attached.

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 Nicolas Fernandez

(Typed or printed name of person signing)

Director

(Title of person signing)

FILING FEE \$35

14 JUL 22 PM 3:34

FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
Feb 28, 2014
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

- FIRST:** The name of the corporation as currently filed with the Florida Department of State:
BIOMEDIZIN USA INC
- SECOND:** The document number of the corporation: P13000013336
- THIRD:** The file date of the articles of incorporation: February 8, 2013
- FOURTH:** None of the corporation's shares have been issued.
- 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:** A majority of the incorporators authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: NICOLAS FERNANDEZ DIRECTOR
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative

FILED
Feb 28, 2014
Secretary of State

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.

Name of Corporation:

BIOMEDIZIN USA INC

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:

DATE OF DISSOLUTION ; FEBRUARY 28TH 2014

Mailing address where claims can be sent:

5203 TILDENS GROVE BLVD
SUITE 811
WINDERMERE, FL 34786 UN

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.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: **NICOLAS FERNANDEZ**

Electronic Signature of the Person Filing