

P16000046605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

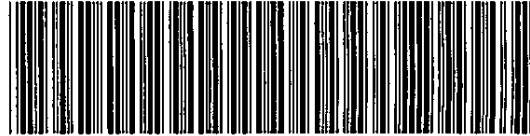
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/17/16--01013--006 **35.00

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16 JUN 17 PM 2:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUN 23 2016

D CUSHING

done w/meliss

06/13/2016

Michael Bahrami
2390 NE 186th Street Miami Florida 33180

Dear Sir or Madam;

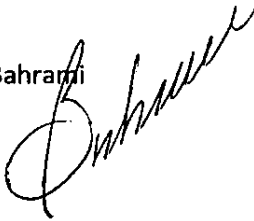
I am a victim of identity theft. The corporation "Florida Medical Consultants.INC." is opened fraudulently and this matter is reported to the police with the case number: P0160607215176

Please dissolve this corporation which created as a result of identity theft.

I appreciate your prompt attention to this matter.

Sincerely,

Michael Bahrami



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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Florida Medical Consultants, INC.

DOCUMENT NUMBER: P16000046605

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

Please return all correspondence concerning this matter to the following:

Michael Bahrami
(Name of Contact Person)

Michael M. Bahrami M.D. P.A.
(Firm/Company)

2390 NE 186th Street
(Address)

Miami Florida 33180
(City/State and Zip Code)

For further information concerning this matter, please call:

Mahsa Bahrami at 305-760-8400 Office
(Name of Contact Person) (Area Code & Daytime Telephone Number)
305-905-1941 Cell

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

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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:

Florida Medical Consultants, INC.

SECOND: The document number of the corporation (if known): P 16 0000 46605

THIRD: The file date of the articles of incorporation: May 25, 2016

FOURTH: (CHECK AT LEAST ONE BOX)

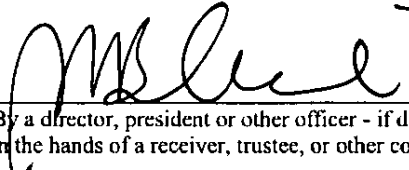
- ☒ None of the corporation's shares have been issued.
- ☐ The corporation has not commenced business.

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.)

Michael Bahrami

(Typed or printed name of person signing)

M. D.

(Title of Person Signing)

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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: Florida Medical Consultants, 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:

This corporation is opened fraudulently and
I am a victim of identity theft. I reported
this to police, case number # P01606072.15176

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

2390 NE 186 street Miami FL 33186

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TALLAHASSEE, FLORIDA

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.

Michael Bahrami
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