

PA7000035368

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

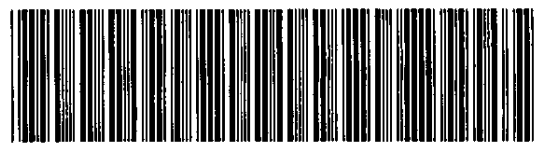
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500287506075

07/20/16--01028--007 **43.75

REV. Diss.

JUL 28 2016

R. WHITE

FILED
16 JUL 20 AM 11:46
STATIONER
TALLAHASSEE, FLORIDA

DAVID K. OAKS, P.A.
Attorney at Law

DAVID K. OAKS

*Also licensed in North Carolina
Email: doaksesq@comcast.net

JACKIE M. SMITH

Florida Registered Paralegal
Email: jackieoakslaw@comcast.net

July 19, 2016

Amendment Section
Division of Corporations
Clifton Bulding
2661 Executive Center Circle
Tallahassee, FL 32301

RE: ALLMED FINANCIAL SERVICES, INC.
Document No. P97000035368

Dear Sir or Madam:

Enclosed please find an original and one copy of the Articles of Revocation of Dissolution for Allmed Financial Services, Inc. Our check in the amount of \$43.75 is enclosed for the filing fee and Certificate of Status.

Thank you for your assistance in this matter.

Yours very truly,



David K. Oaks

DKO:js

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: ALLMED FINANCIAL SERVICES, INC.

SECOND: The document number of the corporation (if known) is P97000035368

THIRD: The effective date (or file date, if no effective date) of the Articles of Dissolution

filed with the Florida Department of State is April 25, 2016

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

FOURTH: The Revocation of Dissolution was authorized on July 18, 2016

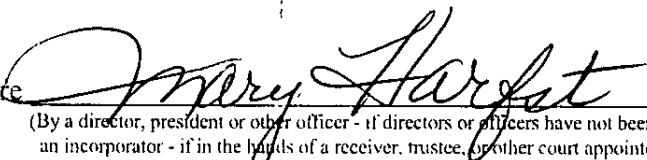
FIFTH: Adoption of Revocation of Dissolution (check one)

- ☐ 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)

MARY HARFST

(Typed or printed name of person signing)

Director, President, Secretary Treasurer

(Title of person signing)

FILED
16 JUL 20 AM 11:46
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
Apr 25, 2016
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:

ALLMED FINANCIAL SERVICES, 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:

BUSINESS SOLD AND ALL MONIES HAVE BEEN DISBURSED.

Mailing address where claims can be sent:

1626 ALBATROSS DR
PUNTA GORDA, FL 33950

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: MARY HARFST

Electronic Signature of the Person Filing

FILED
Apr 25, 2016
Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, 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:
ALLMED FINANCIAL SERVICES, INC.
- SECOND:** The document number of the corporation: P97000035368
- THIRD:** The date dissolution was authorized: April 25, 2016
Effective date of dissolution: April 25, 2016
- FOURTH:** Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

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: MARY HARFST PRESIDENT
Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative