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(F	Requestor's Name)	
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PICK-UP		MAIL
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Milhard Wall

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: P&R Dental Strategies	, Inc. Name of Corporation)
DOCUMENT NUMBER: F060000044	36
The enclosed withdrawal application and fee	are submitted for filing.
Please return all correspondence concerning th matter to the following:	is
Cheryl Eckstein	
	Name of Person)
P&R Dental Strategies,	Inc.
(Firm/Company)
255 West 36th Street,	Suite 1404
	(Address)
New York, NY 10018	
(City	/State and Zip code)
For further information concerning this matter,	, please call:
Cheryl Eckstein	at (_212) 686-2777
(Name of Person) Enclosed is a check for the amount:	(Area Code & Daytime Telephone Number)
\$35 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & \$52.50 Filing Fee, Certified Copy Certificate of Status & Certified (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 2661 Executive Center Circle Tallahassee, FL. 32301

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

	P&R Dental Strategies, Inc.	
-	(Name of Corporation)	
		<u>.</u> 2
	F06000004436	(if known)
-	(Document Number of Corporation	(if known)
		2
		4
	New York (Incorporated Under Laws	<u> </u>
	(incorporated chuci Laws	
voluntaril	oration is no longer transacting business or conducting sly surrenders its authority to transact business or conduct	affairs in Florida.
appoints	poration revokes the authority of its registered agent in the Department of State as its agent for service of process it was authorized to transact business or conduct affairs in	ess based on a cause of action arising during
The follo	wing is a current mailing address for the corporation:	
	· · · · · · · · · · · · · · · · · · ·	
	255 West 36th Street, Suite 1404	
	(Mailing Address)	
	New Yoek, NY 10018	
	(City/ State /Zip)	, 444-448, at 15-44,
The corpo	oration agrees to notify the Department of State in the fu	ture of any change in its mailing address.
J	Institute of the state of	12-16-14
(S r	signature of a director, president or other officer - if in the hands of a eceiver or other court appointed fiduciary, by that fiduciary)	12-16-14 (Date)
_	Tyrette Hamilton (Typed or printed name of person signing)	COO (Title of person signing)