



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 29, 2010

L10000038586

ESTHETIC & IMPLANT DENTISTRY OF S FL
1000 45TH ST., UNIT 3
WEST PALM BEACH, FL 33407

SUBJECT: IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC
Ref. Number: L10000038586

000189178150

Debit Memo #: 02131-F

Due to your failure to respond to our previous letter advising you of the attached returned check #1136, the Amendment for IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC has been cancelled and is considered not filed as of December 29, 2010.

If you have any questions concerning the returned check, please call (850) 245-6900.

Sincerely
Michelle Milligan
Administrative Assistant II
Division of Corporations

Letter Number: 310A00030090

cc:IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC
8136 OKEECHOBEE BLVD., STE. B
WEST PALM BEACH, FL 33407



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 3, 2010

ESTHETIC & IMPLANT DENTISTRY OF S FL
1000 45TH ST., UNIT 3
WEST PALM BEACH, FL 33407

SUBJECT: IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC
Ref. Number: L10000038586

Debit Memo #: 02131-F

This is to inform you that your check #1136 dated October 9, 2010 in the amount of \$170.00 and submitted for IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC has been returned to us by your bank because of NON-SUFFICIENT FUNDS.

As we cannot take credit card information over the phone, we request that you remit a cashier's check or money order in amount of \$185.00 made payable to the Department of State. This amount will cover the unpaid check and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashiers check or money order, please indicate the debit memo number and that it is a replacement for the returned check mentioned above.

Please note: The documents filed in this office with the returned check will be cancelled unless a replacement check is received within 30 days from the date of this letter. Send the replacement check to:

Division of Corporations
Attn: Michelle Milligan
P.O. Box 6327
Tallahassee, FL 32314

If you have any questions concerning the returned check, please call
(850) 245-6900.

Sincerely,
Michelle Milligan
Administrative Assistant II
Division of Corporations

Letter number: 510A00025927

cc:IMPLANT DENTAL GROUP OF SOUTH FLORIDA, LLC
8136 OKEECHOBEE BLVD., SUITE B

WEST PALM BEACH, FL 33407