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To:

Division of Corporations

Fax Number

: (850)617-6380

Account Name : A1A REGISTERED AGENT INC.

Account Number : I20090000032

Phone : (866)703-8828

Fax Number : (561)202-8082

REGISTERED AGENT RESIGNATION

TETIC DENTISTRY & FACIAL ESTHETICS, OF NAPLES, INC.

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 61	7.1509,
Florida Statutes, the undersigned, A1	A REGISTERED AGENT INC.	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	COSMETIC DENTISTRY & FACIAL	ESTHETICS
	OF NAPLES INC	
P05000126352	OF PAPES, INC.	
(Document Number, if known)	_	
A copy of this resignation was mailed to	o the above listed corporation at its last kr	nown address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the dat	e on which
Jina	Imali:	
(Sig	anature of Resigning Agent)	-
If signing on behalf of an entity:		2009 SEL
TINA MAKI		2009 NOV -2 SECRE TARY FALLAHASSE
(*	Typed or Printed Name)	-2 SSE
PRESIDENT		E P A
	(Capacity)	3: 3: ORID

## Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

Make checks payable to Florida Department of State and mail to; Division of Corporations P.O. Box 6327 Tallahasson, FL 32314

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