DEBIT MEMORANDUM

FOR

OFFICIAL USE

DATE

NUMBER

-499

9199

ATL OF FLORIDA L OL STATE TREASTRER LLANDSSEL LORIDA

FUND	AMOUNT	REASON RETURNED	KEY #= *	*****	*
GENERAL REVENUE	0.00	INSUFFICIENT FUNDS	1 = *		*
TRUST	1,158.75	ACCOUNT CLOSED	2 *	2	*
OTHER		UNCOLLECTED FUNDS	3 **		*
	1,158.75	OTHER	4 - *	*****	* * ***

CROSS REF	DISTRIBUTION SAMAS CODE	REASON	<i>≡</i> AMŌUNT
012 012 012 012 012	45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00 45-20-2-130001-45300000-00-000100-00	1 3 1 3	50.00
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GRAND TOTAL:

\$ 1,158.75

91991-D

200002779652--1

Process Date: 12/15/98

TO:

DEPT. OF STATE

The above named fund(s) has been reduced by the amount of this check(s) under authority of Section 215.34, F.S.

State_Treasurer

FOR Mapras First Union National Bank
St. Petersburg, Florida
24 Hour Information Service
1-800-735-1012 112 3 7 E C 118 powerwant Hundred THE MEDICINE SHOPPE 3931 CENTRAL AVE. 327-4508 ST. PETERSBURG, FL 33713 Look for: blue background on the front of this check, and the imageSafe® lago on #12 1 0 3 1 2 1 0 0 0 0 0 0 2 3 1 6 1 5 4 0 1 E 9 0 3 1 KEQ Account Closed Signature Missing Meomplete Psign, Not Lity File V.Unavailable > Funds Other ** NSF, UNLESS, OTHERWISE MARK DATE_ 198 198 ☐ Alterations ",00005 L0000", 1 Slolo Litaris Manager indorsement 63-751/631 00496

DEFT OF STATE 4500453
FOR DEPOSIT ONLY
-12/03/98--01087--004
1009068796.*****750.00.85 LINE
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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

January 15, 1999

The Medicine Shoppe 3931 Central Ave. St. Petersburg, FL 33713

SUBJECT: PARKLANE EAST CORPORATION

Ref. Number: P97000025865

Debit Memo #: 91991-D

This is to inform you that your check #3766 dated November 25, 1998 in the amount of \$750.00 and submitted for PARKLANE EAST CORPORATION has been returned to us by your bank because of Nonsufficient funds.

We request that you remit a cashier's check or money order in amount of \$787.50 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:

Letter number: 899A00002258

Division of Corporations Attn: Melinda Lilliston P.O. Box 6327 Tallahassee, FL 32314

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely, Melinda Lilliston Administrative Assistant II Division of Corporations

cc:Parklane East Corp. 3931 Central Ave. St. Petersburg, Fl. 33713



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

February 22, 1999

The Medicine Shoppe 3931 Central Ave. St. Petesburg, FL 33713

SUBJECT: PARKLANE EAST CORPORATION

Ref. Number: P97000025865

Debit Memo #: 91991-D

Due to your failure to respond to our previous letter advising you of the returned check #3766, the Reinstatement for PARKLANE EAST CORPORATION has been cancelled and is considered not filed as of February 22, 1999.

The status of your corporation has now reverted to its previous status of administratively dissolved or revoked.

If you have any questions concerning the returned check, please call (850) 487-6900.

Sincerely Melinda Lilliston Administrative Assistant II Division of Corporations

Letter number: 399A00008022

cc:Parklane East Corp. 3931 Central Ave. St. Petersburg, Fl. 33713