



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 2, 2014

MAMMANA CHIROPRACTIC CLINIC, INC
3256 NE JACKSONVILLE ROAD, SUITE C
OCALA, FL 34479

300263901503

SUBJECT: MAMMANA CHIROPRACTIC CLINIC, INC.
Ref. Number: P99000007017

Debit Memo #: 10833-B

Due to your failure to respond to our previous letter advising you of the attached returned check #3195, the Reinstatement for MAMMANA CHIROPRACTIC CLINIC, INC. has been cancelled and is considered not filed as of September 2, 2014.

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

If you have any questions concerning the returned check, please call (850) 245-6887.

Sincerely
Garry Leonard
Administrative Assistant
Division of Corporations

Letter number: 314A00018646



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 18, 2014

MAMMANA CHIROPRACTIC CLINIC, INC
3256 NE JACKSONVILLE ROAD, SUITE C
OCALA, FL 34479

SUBJECT: MAMMANA CHIROPRACTIC CLINIC, INC.
Ref. Number: P99000007017

Debit Memo #: 10833-B

This is to inform you that your check #3195 dated June 13, 2014 in the amount of \$900.00 submitted with the annual report for MAMMANA CHIROPRACTIC CLINIC, INC. has been returned to us by your bank because of NON SUFFICIENT FUNDS.

As this payment cannot be replaced from our website and we cannot take credit card information over the phone, we request that you remit a cashier's check or money order in the amount of \$945.00 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: If you fail to respond to this letter, the annual report will be cancelled and considered not filed unless a replacement check is received within 30 days from the date of this letter. If the annual report is cancelled for non-payment, you will be required to re-file the annual report online at www.sunbiz.org. Send the replacement check to:

Division of Corporations
Attn: Garry Leonard
P.O. Box 6327
Tallahassee, FL 32314

Sections 607.1421 and 607.1531, Florida Statutes, requires us to give notice of our intent to administratively dissolve a Florida corporation or revoke the authority to transact business of a corporation for failure to file the annual report and pay the filing fees. Consider this your notice if the annual report is not filed and payment is not received, your corporation will be dissolved or revoked on the fourth Friday in September and a reinstatement fee of an additional \$600 will be imposed.

If you have any questions concerning the returned check, please call (850) 245-6887.

Sincerely,
Garry Leonard
Administrative Assistant
Division of Corporations

Letter number: 914A00015479