

License Renewal Confirmation

Date: [Insert Date]

Dear [Nutritionist's Name],

We are pleased to inform you that your application for the renewal of your nutritionist license has been successfully processed. Your renewed license is valid until [Insert Expiration Date].

Please find the details of your license renewal below:

- License Number: [Insert License Number]
- Renewal Date: [Insert Renewal Date]
- Expiration Date: [Insert Expiration Date]

If you have any questions or require further assistance, please do not hesitate to contact us at [Insert Contact Information].

Thank you for your continued commitment to providing quality nutrition services.

Best regards,

[Your Name]

[Your Title]

[Your Organization]

[Contact Information]