F98000002503

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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DE JAN 31 AM 10 OC SLUKCI AKT OF STATI TAIT AHASSEE, FLORIC

CT CORPORATION

January 26, 2006

RE: ER ASSOCIATES, INC.

(FL.DOM.)

KH ASSOCIATES, INC.

(FL.DOM.)

L.C.D.S. ASSOCIATRES, INC.

(FL.DOM.)

PSYCHPARTNERS OF FLORIDA, INC. (DE.DOM.)
PSYCHPARTNERS NORTH FLORIDA, INC. (DE.

(DE.DOM.)

SKH ASSOCIATES, INC.

(FL.DOM.)

Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL. 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporations. Also enclosed is <u>1</u> check in amount of \$210.00 to cover the required filing fee.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri(lk)

Theresa Alfieri

Senior Supervisor & Assistant Secretary

111 Trop H Avenue
New York I NY 10011
Tel. 212 894 8940
Fax 212 590 9180

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,	C T CORPORATION SYSTEM	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	PSYCHPARTNERS OF FLORIDA, INC. (DE. DOM.)	
	(Name of Corporation)	
F98000002503		
(Document Number, if known)	<u> </u>	
A copy of this resignation was mailed to the above listed corporation at its last known address.		
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.		
Hoek		
(Signature of Resigning Agent)		
If signing on behalf of an entity:		
C T CORPORATION SYSTEM - THERESA ALFIERI		
(Typed or Printed Name)		
AS	(Capacity) g this document: ive corporation	
	(Capacity)	
	2 3 T	
	1555 - LE	
Fee for filin	g this document:	
<u> </u>	ive corporation	
	ministratively dissolved/voluntarily dissolved/	
	hdrawn corporation	

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