F98000000053

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
(0).	.,rotate/2ip/1 Hono	<i>"'</i>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		l
		

Office Use Only



300120584233

03/20/08--01025--001 **43.75

DIVISION OF CORPORATION

Withdrawal CUISICC May 4,7,08

COVER LETTER

	Amendment Section Division of Corporations
SUBJE	CCT: Community Psychological Assurates, Enci
	MENT NUMBER: F980000 6253
The end	closed withdrawal application and fee are submitted for filing.
	return all correspondence concerning this to the following:
	Michael K West (Name of Person)
	(Name of Person)
	(Firm/Company)
	11101 Georgia Avenue, #510
	(Address)
	11101 Georgic Avenue, #570 (Address) Wheaten, MP 20902 (City/State and Zip code)
	(City/State and Zip code)
For fur	ther information concerning this matter, please call:
	Michael West at (40) 337-6575 (Name of Person) (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 24, 2008

MICHAEL K. WEST COMMUNITY PSYCHOLOGICAL ASSOCIATES, INC. 11101 GEORGIA AVE WHEATON, MD 20902

SUBJECT: COMMUNITY PSYCHOLOGICAL ASSOCIATES, INC.

Ref. Number: F98000006253

We have received your document for COMMUNITY PSYCHOLOGICAL ASSOCIATES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Dissolution to dissolve a Florida domestic corporation have been submitted in error. A withdrawal application must be filed to withdraw the authority of a foreign corporation in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 908A00017365

NECETARY TENNER OF STATE SECRETARY TALES TALES TALES TALES TALEDA

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Community Psychological Associate, Ini
(paine of corporation)
F 98 00006253 (Document Number of Corporation (if known)
(Document Number of Corporation (if known)
(Incorporated Under Laws of)
(Incorporated Under Laws of)
This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida. This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and
appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.
The following is a current mailing address for the corporation:
11101 Georgi Ave # 570 (Mailing Address)
Wheating, IND 70902 (City/State/Zip)
The corporation agrees to notify the Department of State in the future of any change in its mailing address.
(Signature of a director president or other officer - if in the hands of a (Date)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary) (Date)
Typed or printed name of person signing) (Typed or printed name of person signing)
(Typed or printed name of person signing) / (Title of person signing)

FILING FEE \$35