

NO600000 5938

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Neuropsychiatric Institute of Florida, Inc
(Name of Corporation)

DOCUMENT NUMBER: ND1600000.5938

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rex A. Birkmire M.D.
(Name of Person)

Neuropsychiatric Institute of Florida
(Name of Firm/Company)

237 Fernwood Blvd Ste 111
(Address)

Casselberry, FL 3270
(City/State/and Zip Code)

For further information concerning this matter, please call:

Rex A. Birkmire M.D. at (407) 332-6506
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:

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

Mailing Address:

Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, RICK E. MCENTIRE, hereby resign as D (Title)

of Neuropsychiatric Institute of Florida, Inc.
(Name of Corporation)

N06000005938, a corporation organized under the laws of the State of
(Document Number, if known)
Florida

Rick E. McEntire
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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

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