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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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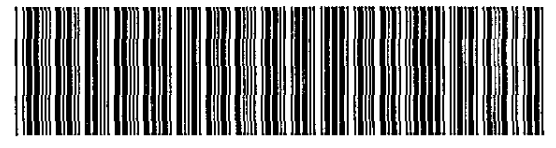
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**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PSYCHOLOGICAL HEALING INSIGHTS, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** P0400034004

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

MARIA E. GRUNGLASSE

(Name of Person)

(Name of Firm/Company)

19436 NE 26 AVENUE #82

(Address)

AVENTURA, FL 33180

(City/State and Zip Code)

For further information concerning this matter, please call:

MARIA E. GRUNGLASSE

(Name of Person)

at ( 786 ) 344-4833

(Area Code & Daytime Telephone Number)

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

**Mailing Address:**

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

**Street Address:**

Amendment Section  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, FL 32399

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**


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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
2005 JUN -8 AM 10:32

I, MARIA E. GRUNGLASSE, hereby resign as VICE PRESIDENT  
(Title)

of PSYCHOLOGICAL HEALING INSIGHTS, INC.  
(Name of Corporation)

P04000034004, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA

  
(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