

PD5000095249

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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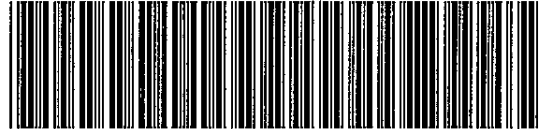
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Psychiatric Consulting Network, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P05000095249

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

Please return all correspondence concerning this matter to the following:

Douglas Gignac

(Name of Person)

Psychiatric Consulting Network, Inc.

(Name of Firm/Company)

10406 S.W. 186 Terrace

(Address)

Miami, FL 33157

(City/State and Zip Code)

For further information concerning this matter, please call:

Douglas Gignac

(Name of Person)

at (954) 415-6940

(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:

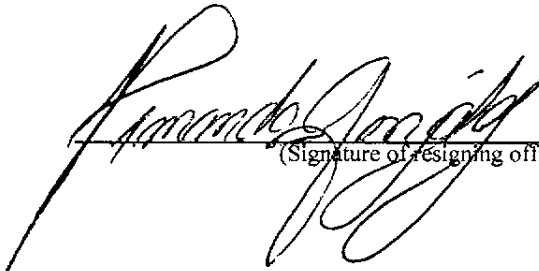
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Armando Gonzalez, hereby resign as Vice-President
(Title)

of Psychiatric Consulting Network, Inc.
(Name of Corporation)

P05000095249, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILED
06 FEB 21 PM 3:00
S. CHIEF OF STATE
TALLAHASSEE, FLORIDA

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