

PO7000 108711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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(Business Entity Name)

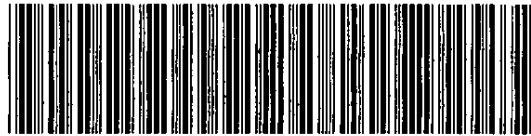
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TALLAHASSEE FL 32309

CD
12/13/08
5

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gorski Relapse Prevention Environments
(Name of Corporation)

DOCUMENT NUMBER: P07000108711

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

Please return all correspondence concerning this matter to the following:

Terence T. Gorski
(Name of Person)

The CENAPS Corporation
(Name of Firm/Company)

6147 Deltona Blvd
(Address)

Spring Hill, FL 34606
(City/State and Zip Code)

For further information concerning this matter, please call:

Terence Gorski at (352) 596-8000
(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:

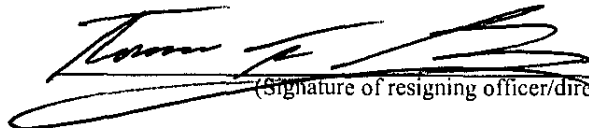
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, TERENCE T. GORSKI, hereby resign as Director
(Title)

of GORSKI Relapse Prevention Environments,
(Name of Corporation)

P07000108711, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILED
08 DEC 19 PM 1:00
SECRETARY 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