

P 23 0000 16778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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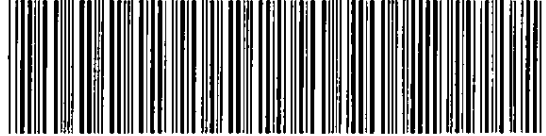
(Business Entity Name)

(Document Number)

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2023 JUL 12 PM 4:39  
SECRETARY OF STATE  
TALLAHASSEE, FL

JUL 13 2023

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Neuropsych Services Coporation  
\_\_\_\_\_  
(Name of Corporation)

**DOCUMENT NUMBER:** P23000016778  
\_\_\_\_\_

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

Please return all correspondence concerning this matter to the following:

Eric Hill  
\_\_\_\_\_

(Name of Person)

Neuropsych Services Corporation  
\_\_\_\_\_

(Name of Firm/Company)

14216 Pondhawk Ln  
\_\_\_\_\_

(Address)

Tampa, FL 33625  
\_\_\_\_\_

(City/State and Zip Code)

For further information concerning this matter, please call:

Diana Hill \_\_\_\_\_ at (813) 546-9673  
(Name of Person) (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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

**FILED**


**2023 JUL 12 PM 4:39**

**SECRETARY OF STATE  
TALLAHASSEE, FL**

I, Eric Hill, hereby resign as Vice President  
(Title)

of Neuropsych Services Coporation  
(Name of Corporation)

P23000016778, 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