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SECRETARY OF STATE
ANASSEE, FLORID

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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Cash Systems, Inc. (Name of Corporation)
DOCUMENT NUMBER:
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing
Please return all correspondence concerning this matter to the following:
Carmalon Gillian (Name of Person)
Cash Systems, Inc. (Name of Firm/Company)
7350 Jean Martin Drive, Suite 309
LOS Vegos NV 89139 (City/State and Zip Code)
For further information concerning this matter, please call:
Camara Gillilan at (702) 987-7190 (Name of Person) at (702) Q87-7190 (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



7350 Dean Martin Drive, Suite 309 | Las Vegas, Nevada 89139 | [P]: 877.987.7169 [F]: 702.987.7168 [W]: cashsystemsinc.com

February 22, 2008

Ms. Karen Gibson
Document Specialist Supervisor
Florida Department of State
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

RE: Letter # 208A00006320

Ref. #: F05000007187

Dear Ms. Gibson:

Enclosed please find the documentation required for the resignation of one of our Board Members, Don R. Kornstein. In addition, enclosed is a check in the amount of \$35 for the resignation/filing fee.

Should you have any additional questions, please feel free to contact me. I can be reached at 702-266-9082 Monday through Friday, 8:00 am - 5:00 pm Pacific Time or via email at christine.memmoli@cashsystemsinc.com.

Thank you.

Sincerely,

Christine A. Memmoli Compliance Coordinator

Enclosures

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I,	Don R. Kornstein , hereby resign as <u>Independent Oire</u> (Title)	?Ctor	_	
of	Cash Systems, Inc. (Name of Corporation)			
	(Document Number, if known), a corporation organized under the laws of the State o	f		
	Delaware.			•
	(Signature of resigning officer/director)	SECRETARY OF	08 FEB 27 PM	

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

FILING FEE IS \$35.00

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