

J28333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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*Dr. Liu Leping*

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 DEC 29 PM 4:30

T. Roberts JAN -19 2009

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Cascade Referral Services Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** J28333

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

Please return all correspondence concerning this matter to the following:

Greg Reynolds  
(Name of Person)

Cascade Referral Services Inc.  
(Name of Firm/Company)

446 Camille Dr.  
(Address)

Osprey, FL 34229  
(City/State and Zip Code)

For further information concerning this matter, please call:

Greg Reynolds at ( 941 ) 232-4331  
(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**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 DEC 29 PM 4:30

I, John Minks, hereby resign as Director  
(Title)

of Cascade Referral Services, Inc.  
(Name of Corporation)

J28333, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

X John Minks  
(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