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ALLAHASSEE, FLORIDA

COVER LETTER

Division of Corporations	
SUBJECT: EXCEL Referral Services, LL	
(Name of Limited Liabili	ty Company)
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for
Please return all correspondence concerning this matt	er to:
MARGARET A. MARDIS	
(Contact Person)	
EXCEL Referral Services, LLC	I S
(Firm/Company)	ECRE
PO Box 1740	₹ • ±±±±
(Address)	
ARCADIA, FL 34265	ARY OF STAN
(City/State and Zip Code)	39 JDA
For further information concerning this matter, please	call:
at (86	63 ₃ 990-1877
	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo \$25 Filing Fee	rida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314

. CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	limited liability company as i CEL Referral Service:		s of the Flo	orida De	partment
2. This limited liab	ility company was organized	under the laws of:	SECRE TALLAH	2008 M	
3. The Florida docu 	ment/registration number of 1912	this limited liability con	TARK OF S	C 61 BVM 880	
4. I, ANN K BU	RSA ame of Person Resigning)	, hereby resign as a	MGR	rint Title)	
of this limited lial resignation in wri	oility company and affirm the ting.	limited liability compa	ny has bee	en notific	ed of my
Signature of Resi	gning Member, Managing Me	ember or Manager			
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)				