P9500009380

		<u> </u>
(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies Certificates of Status		s of Status
	-	
Special Instructions to	Filing Officer:	

Office Use Only



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03/27/08--01008--007 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: CHOICE Référal Company, INC. (Name of Corporation)
DOCUMENT NUMBER: \$9500009380
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Person)
(Name of Person)
Name of Firm/Company)
(Name of Firm/Company)
6 909 BEACH BIVO.
Hub Sort Rt 34667 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (127) 863-2524 (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, AMES Sweetin , hereby resign as Directur / Secretary
of Hoice Refused Outstry, Fr. (Title)
7950000 9380, a corporation organized under the laws of the State of (Document Number, if known)
Florida.
On File - Resigning officer/director) under Separate Cover Letter.
(Signature of resigning officer/director) under Soparate Willer.

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