P06000073382

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	s of Status
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STARE TARY OF STAIL
ALTEANASSEE, FLORID,
12/31/07

Open Risign Cris Murphy 1/3/08

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: <u>Are Fromulions Inc.</u> (Name of Corporation) DOCUMENT NUMBER: POGODO 73382
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Lowience Williams (Name of Person)
Oce Promotions Inc. (Name of Firm/Company)
(Name of Firm/Company)
7701 NW S6 Th Ave Ste 2 (Address)
(Address) Pompano Beach FL 33076 (City/State and Zip Code)
For further information concerning this matter, please call:
Lawrence Wilkiams at (501) 305-2554 (Name of Person) at (501) 305-2554 (Area Code & Daytime Telephone Number)
(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

I, Lawrence Williams, hereby resign as 5VD	Title)
of Re Promotion S Inc- (Name of Corporation)	,
P06 0000 73382 a corporation organized under the laws of the Cocument Number, if known) Torida	e State of
(Signature of resigning officer/director)	OTDEC 31 SECRETARY TALLAHASSE
FILING FEE IS \$35.00	PMI2:07 PGF STAIL EE. FLORIDA

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

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