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(Re	equestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: The Alliance Theatre Lab, Inc. (Name of Corporation)
DOCUMENT NUMBER: N 040000 9652
The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Adalberto Acevedo (Name of Person)
The Alliance theatre Lab, Inc. (Name of Firm/Company)
230 NW 52 Ave. (Address)
MIAMI FL 33126 (City/State and Zip Code)
For further information concerning this matter, please call:
Antonio Rodnauz at (30T) 557-7224 (Name of Person) at (30T) 557-7224 (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. Antonio Bodrig	hereby resign as Treasurer (Title)
of the Alliance (Nan	Then tre 46, Inc ne of Corporation)
N04000009652 (Document Number, if known)	, a corporation organized under the laws of the State of
Florida	

(Segnature 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