(Requestor's Name)	
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I ALBRITTON

TRANSMITTAL LETTER

Amendment Section Division of Corporations TO:

SUBJECT: TTALPROMOTIONS, INC.				
((Name of Corporation)			
DOCUMENT NUMBER: P05000011764				
The enclosed Officer/Director Resignation fo	or a Corporati	on and fee are submitted for filing		
Please return all correspondence concerning t	this matter to	the following:		
WILLIAM PIZZORNI				
(Name of Person)		-		
ITALPROMOTIONS, INC.				
(Name of Firm/Company)		···		
1111 Kane Cocourse, suite 410				
(Address)				
Bay Harbor Islands, FL. 33154				
(City/State and Zip Code)	<u> </u>			
For further information concerning this matte	er, please call	:		
Milagros Paez	at (861-90-86) ode & Daytime Telephone Number)		
(Name of Person)	(Area Co	ode & Daytime Telephone Number)		

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

CARLOS DORADO 1.	PRESIDENT, hereby resign as	
**	, nereoy resign as	(Title)
TTALPROMOTIONS, INC.		
(Nan	ne of Corporation)	
P05000011764	, a corporation organized under the laws	s of the State of
FLORIDA		
	(Signature of refiguring officer/director)	
		. : . .
	FILING FEE IS \$35.00	Ċ

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

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