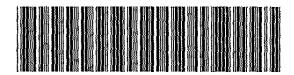
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SECRETARY OF ELATE

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COVER LETTER

TO:

TO:	Registration Section Division of Corporations				
SUBJ	ECT:	DTO ENTE	RTAINMENT	T, LLC	
		(Name of Li	mited Liability Com	ipany)	
Dear S	Sir or Madam:				
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The e	nclosed Resignation of N	Aember, Managin	g Member or Ma	anager and fee(s) are subm	itted for
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DAV.	ID A. HARRISON	i.			FEST
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	(Firm/	Company)		-	
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POS	T OFFICE BOX 1	0161			
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	1,200	11033)			
co	COA, FLORIDA	22027			
<u> </u>		and Zip Code)		~	
	Cityistate	and hip Code)			
For fu	rther information concer	ning this matter,	please call:		
DAV	ID A. HARRISO	N	at (321	544-2130	
	(Name of Pers	son)		& Daytime Telephone No	ımber)
STRE	ET/COURIER ADDR	ESS:		MAILING ADDRESS:	
	tration Section			Registration Section	
Divisi	on of Corporations			Division of Corporations	;
	n Building			P.O. Box 6327	
	Executive Center Circle			Tallahassee, Florida 323	14
Tallar	assee, Florida 32301				
Encio	sed is a check for the fo	ollowing amount	;		
	 ▼ \$25 Filing	Fee	J 19	855 Filing Fee &	
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CR2E0	79 (8/05)			15	



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGING

I, MICHAEL T. JALOWIEC , hereby resign as MANAGER/MEMBER (Title)

of DTO ENTERTAINMENT, LLC (Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA , and affirm that the limited liability company has been politiced in writing of the resignation.

(Signature of resigning manager, managing member or member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314