L18000190401

_____
(Requestor's Name)

_____
(Address)

_____
(Address)

_____
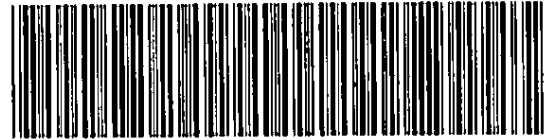(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____
(Business Entity Name)

_____
(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: DMJT, LLC
_____
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Lisa Lye
_____
(Contact Person)

Jackson Law PA
_____
(Firm/Company)

5401 S Kirkman Rd. Suite 310
_____
(Address)

Orlando, FL 32819
_____
(City/State and Zip Code)

For further information concerning this matter, please call:

Lisa Lye   407   363-9020
_____ at (_____) _____
(Name of Contact Person)   (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
■ $25 Filing Fee   ☐ $55 Filing Fee & Certified Copy

<table>
<tr><td><u>Mailing Address:</u></td><td><u>Street Address:</u></td></tr>
<tr><td>Registration Section</td><td>Registration Section</td></tr>
<tr><td>Division of Corporations</td><td>Division of Corporations</td></tr>
<tr><td>P.O. Box 6327</td><td>The Centre of Tallahassee</td></tr>
<tr><td>Tallahassee, FL 32314</td><td>2415 N. Monroe Street, Suite 810</td></tr>
<tr><td></td><td>Tallahassee, FL 32303</td></tr>
</table>

CR2E079 (2/14)

DISSOCIATION OF MEMBER, MANAGER
FROM DMJT, LLC, A FLORIDA LIMITED LIABILITY COMPANY
(Pursuant to 605.0216, Florida Statutes)

Pursuant to the provisions of section 605.0216, Florida Statutes, I, Carole A. Tronnes,
hereby dissociate as a member of DMJT, LLC, a limited liability company organized under the
laws of the State of Florida, Florida document/registration number is L18000190401.

The effective date of dissociation is December 30, 2019. I affirm that the limited liability
company has been notified in writing of my resignation and dissociation.

_____

Signature of Dissociating Member

Dated: _____December 30___, 2019