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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations	
DTC VENTURES, LLC SUBJECT:	
(Name of Limited Liabil	ity Company)
The enclosed member, resignation or dissociation and	d fee(s) are submitted for filing.
Please return all correspondence concerning this matt	ter to:
TIFFANY TINDAL-PINKSTON	
(Contact Person)	
DTC VENTURES, LLC	
(Firm/Company)	
4235 SW 111th PL	
(Address)	-
OCALA FL 34476	
(City/State and Zip Code)	
For further information concerning this matter, please	e call:
TIFFANY TINDAL-PINKSTON 352 at (
	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Flo ☐ \$25 Filing Fee ☐ \$55	orida Department of State for: Filing Fee & Certified Copy
Mailing Address: Registration Section	Street Address: Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
ranumasee, ras as tr	Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company a	as it appears on the records of the	Florida Department
2. The Florida doct L23000431595	ument/registration number	assigned to this limited liability co	ompany is:
3. The date this me	:mber/manager withdrew/re	esigned or will withdraw/resign is:	APRIL 30, 2024
TIEBANN TIND	AL DINPETON	, hereby withdraw/resign as	
MANAGER			
***	(Print Title)		
of this limited lia resignation in wr		the limited liability company has b	ocen notified of my
	Sindell - Puissociating Member or Resi	+ 	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		2024 SEC