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SECRETARY OF STATE
FALLAHASSEE, FLORIDA

T. HAMPTON

EXAMINER

Wolters Kluwer
Corporate Legal Services

CT Corporation

111 Eighth Avenue New York, NY 10011 212 894 8940 tel 212 590 9180 fax www.ctcorporation.com

October 31, 2011

RE: ADVANCED TITLE & ESCROW, LLC. (MS. DOM) ALLIANCE PARTNERS, LLC. (TX. DOM.)

DELL FRANKLIN FINANCIAL, LLC. (MD. DOM.)
SUNCAR FAMILY INVESTMENTS, LLC. (FL. DOM>)

Department of State
Division of Corporations
Clifton Building
261 Executive Center Circle
Tallahassee, Florida 32301

Dear Sir or Madam:

We enclose resignation executed in duplicate, by the agent for service of process for the above corporation. Also enclosed is $\underline{1}$ check in the amount $\underline{100.00}$ to cover the required filing fee.

Please acknowledge receipt by signing and returning the enclosed copy of this letter. For your convenience, we enclose a stamped self- address envelope.

Very truly yours,

C T CORPORATION SYSTEM

Theresa Alfieri

Theresa Alfieri Senior Supervisor & Assistant Secretary

TA:lf Enclosure



RESIGNATION OF REGISTERED AGENT FOR A LIMITED **LIABILITY COMPANY**

Pursuant to the provis	ions of section 608.416(2) or	r 608.509, Florida Statutes, the	e undersigned,
C T CORPORATION SYSTEM		, hereby resigns as	
	(Name of Registered Agent)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	, , , 1001g.11 110
Registered Agent for	DELL FRANKLIN FINA	NCIAL, LLC. (MD. DOM.)	· ·
	(Name of Limited	Liability Company)	
M060000031	91		
(Document Nu	umber, if known)		
A copy of this resigna	tion was mailed to the above	e listed limited liability compa	ny at its last known address.
The agency is termina	ted and the office discontinu	ed on the 31st day after the da	ate on which this statement is filed.
16 de la constant de 16		of Resigning Agent)	FI 2011 NOV
If signing on behalf of	•		SS -8 -
	C T CORPORATION S	SYSTEM - Theresa Alfieri	E PR
	, ,,	or Printed Name) NT SECRETARY	M 12: L F STA F LOR
	(C	apacity)	- FDA

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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