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10 NOV -5 AMII: 15

J. BRYAN

NOV - 8 2010

**EXAMINER** 

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Flagship Funding (Name of Limited Li	// LLC ability Company)	
The enclosed member, managing member or manafiling.	ager resignation and fee(s) are submitted for	
Please return all correspondence concerning this n	natter to:	
Jennifer Barrett Gauna (Contact Person)	SECRETA TALLAHA	
ECFC Holdings Inc. (Firm/Company)	NOV-5 AM II: I	
3 Christy Drive, Suite 201	DRID A	
Chadds Ford PA 19317 (City/State and Zip Code)		
For further information concerning this matter, ple	ease call:	
Lynifer Barrett Gauna at ( (Name of Contact Person) (A	Area Code & Daytime Telephone Number)	
Enclosed please find a check made payable to the \$25 Filing Fee	Florida Department of State for:  \$55 Filing Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314	
	,	

CR2E079 (5/06)

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	mited liability company as it appears on the records of the Floring II LLC	orida Department
\	ity company was organized under the laws of:	N-5 AMIII
3. The Florida docum	nent/registration number of this limited liability company is:	TATE ORIDA
	C. Ritter , hereby resign as a Hand me of Person Resigning) (Pr	runji nie)
resignation in writi		n notified of my
Signature of Resign	ning Member, Managing Member or Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	