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Account Number : FCA000000023 Phone

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LLC DISSOLUTION OR WITHDRAWAL DELMARVA BANK DATA PROCESSING CENTER, LLC

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April 8, 2014

FLORIDA DEPARTMENT OF STATE

DELMARVA BANK DATA PROCESSING CENTER, LLC 113 SEABOARD LANE SUITE A-2500 FRANKLIN, TN 37067

SUBJECT: DELMARVA BANK DATA PROCESSING CENTER, LLC

REF: M12000001690

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III FAX Aud. #: H14000082233 Letter Number: 014A00007442

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## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| <b>DELMARVA</b>                       | BANK DATA PROCESSING CENTER, LLC  |
|---------------------------------------|---|
| · · · · · · · · · · · · · · · · · · · | (Name of limited liability company)                                       |
| DELAWARE                              |   |
|                                       | (Jurisdiction of its organization)  |
| 03/26/2012                            |   |
|                                       | (Date registered with Florida Department of State)                        |
| M1200000169                           | 90  |
| ,                                     | (Florida Document Number)   |
| This limited liab                     | pility company is withdrawing its certificate of authority in this state. |
| _                                     | · Oa-   |
|                                       | (Signature Cauthorized representative)                                    |
| _                                     | Michael P. Oates  |
| -                                     | (Typed or printed name of signee)   |

Filing Fee: \$25.00

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