

MI7000003020

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

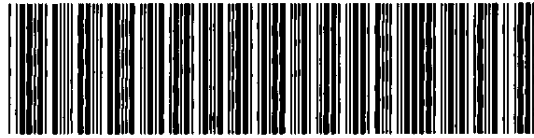
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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17 APR 24 PM 2:52

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2017 APR 24 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
APR 25 2017

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
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4/24/17

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Withdrawal

1.

1110 Fort Walton Medical Properties, LLC
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1110 Fort Walton Medical Properties, LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jessica French

(Name of Person)

Kayne Anderson Real Estate Advisors

(Firm/Company)

One Town Center Road, STE 300

(Address)

Boca Raton, FL 33486

(City/State and Zip Code)

For further information concerning this matter, please call:

Jessica French at (561) 300-6255
(Name of Person) (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2017 APR 24 AM 8:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

1110 Fort Walton Medical Properties, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

April 7, 2015

(Date registered with Florida Department of State)

M17000003020

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.



(Signature of authorized representative)

Meegan T. Motisi, Authorized Person

(Typed or printed name of signee)

Filing Fee: \$25.00