B/100000030

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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DIVISION OF CONTO-ATIONS

O SIMMONS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

__ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 764673 7775081 AUTHORIZATION : COST LIMIT : ORDER DATE : August 11, 2017 ORDER TIME : 9:29 AM ORDER NO. : 764673-040 CUSTOMER NO: 7775081 FOREIGN FILINGS NAME: SUNRISE THIRD (POOL IV), $_{
m LP}$ CORPORATE XX LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER: _

COVER LETTER

TO: Registration S Division of C						
	ise Third (Pool		ty Limit	od Partnershin)		
	of Cancellation and fe		•	·		
	espondence concernin	•		5		
Transcretain an eart	espondence concerns.	5				
Aurora Kurth			_			
Welltower, Inc.	(Contact Person)					
	(Firm/Company)		_			
4500 Dorr Sti	reet		_			
	(Address)					
Toledo, OH 4			_			
(1	City, State and Zip Code)					
For further information concerning this matter, please call:						
Aurora Kurth		_{at (} 419	,247	7-5724 ytime Telephone Number)		
(Name of Conta	act Person)	(Area Code	and Da	ytime Telephone Number)		
Enclosed is a check for the following amount:						
\$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	\$105.00 Filin and Certified Co		S113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRESS:		MAILING ADDRESS:				
Registration Section		Registration Section				
Division of Corporations Clifton Building		Division of Corporations P. O. Box 6327				
2661 Executive Center Circle Tallahassee, FL 32301		Tallahassee, FL 32314				
rananassee, i C 323	V I					

NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

EIMITED CIADILITY CIMITED PARTY	NEKSIHI
Sunrise Third (Pool IV), LP	10000000000000000000000000000000000000
(Name of foreign limited partnership or limited liability B1100000032	y limited partnership) LELP)
(Florida Document Number of the Foreign LP or	LELLP) 意 呈 〇
California	
(Jurisdiction of formation)	
02/15/2011	·
(Date authorized to transact business in Florid	da)
This foreign limited partnership or limited liability limited part transacting business in Florida and wishes to cancel its certificas, 620,1907, F.S.	
This entity appoints the Florida Department of State as its agenrights of action arising out of the transaction of business in this	nt for service of process for state.
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after the date this a Department of State.)	document is filed by the Florida
NOTE: If the date inserted in this block does not meet the apprequirements, this date will not be listed as the document's effe Department of State's records.	
Signature of a general partner: Sunrise Third (Pool IV), LP	
May 10 Chest	
E9A81EFF1E4C425	
Typed or printed name:	
Tracy W. Carte, Authorized Person of the general partner	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	