B110000000033

(Re	questor's Name)			
(Address)				
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
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Certified Copies	_ Certificates	s of Status		
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17 AUG 14 AM 9: 03

S. WARREN AUG 1 5 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

: '

REFERENCE : 764673 7775081

AUTHORIZATION :

COST LIMIT : \$ 52/50

ORDER DATE: August 11, 2017

ORDER TIME : 9:27 AM

ORDER NO. : 764673-060

CUSTOMER NO: 7775081

FOREIGN FILINGS

NAME: SUNRISE THIRD (POOL I), 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

CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER:

COVER LETTER

TO: Registration Division of C					
_{SUBJECT:} Sunr	rise Third (Pool	I), LP			
(Name of	Foreign Limited Partnershi	p or Limited Liabil	ity Limit	ted Partnership)	
The enclosed Notice	of Cancellation and fo	cc(s) are submitt	ed for	filing.	
Please return all con	respondence concernin	g this matter to:			
Aurora Kurth			_		
	(Contact Person)				
Welltower, Inc		·	_		
	(Firm/Company)				
4500 Dorr St	reet		_		
	(Address)				
Toledo, OH 4	13615				
(City, State and Zip Code)				
For further informat	ion concerning this ma	itter, please call:			
Aurora Kurth		_ _{at (} 419)24	7-5724	
(Name of Cont	act Person)			ytime Telephone Number)	
Enclosed is a check	for the following amou	unt:			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified Co		S113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRES	SS:	MAII.	ING A	ADDRESS:	
Registration Section		~	Registration Section		
Division of Corporations Clifton Building		Division of Corporations P. O. Box 6327			
Cition Building 2661 Executive Center Circle		Tallahassee, FL 32314			
Tallahassee, FL 323					

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

Sunrise Third (Pool I), I	_P	
(Name of foreign B11000000033	limited partnership or limi	ted liability limited partnership)
(Florida Doc	ument Number of the Fore	rign LP or LLLP)
California		
	(Jurisdiction of formatic	on)
02/15/2011		
(Date au	thorized to transact busine	ess in Florida)
This foreign limited partnership transacting business in Florida a s. 620.1907, F.S.		nited partnership is no longer s certificate of authority pursuant to
This entity appoints the Florida rights of action arising out of the		s its agent for service of process for ess in this state.
Effective date, if other than the of (Effective date cannot be prior to nor in Department of State.)	date of filing: more than 90 days after the	e date this document is filed by the Florida
NOTE: If the date inserted in the requirements, this date will not be Department of State's records.		
Signature of a general partner: S	Sunrise Third (Pool I).	LP
<u> (Macy W. Chile</u> —EBAB1EFF1E4C425		
Typed or printed name:		
Tracy W. Carte, Authorized Person	of the general partner	
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	17 AUG

\$8.75

Certificate of Status (optional):