

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

DIS0000000024

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000417440 3)))



H200004174403ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

2020 DEC 7 AM 11:37

To: Division of Corporations
Fax Number : (850) 617-6380

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855) 498-5500
Fax Number : (800) 432-3622

**DISSOLUTION OR WITHDRAWAL
KB LAKE CITY DIALYSIS, DST**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$43.75

2020 DEC -7 AM 11:37

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

DIS 000000

**APPLICATION BY DECLARATION OF TRUST FOR WITHDRAWAL OF
AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

KB LAKE CITY DIALYSIS, DST

(Name of Declaration of Trust)

D15000000024

(Document Number of Declaration of Trust (if known))

Delaware

(Incorporated Under Laws of)

This Declaration of Trust is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address for the Declaration of Trust:

1645 Village Center Circle, Suite 200

(Mailing Address)

Las Vegas, NV 89134

(City/ State /Zip)

2020 DEC -7 AM 11:37

FILED

The Declaration of Trust agrees to notify the Department of State in the future of any change in its mailing address.

(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

Chris Sorensen

(Typed or printed name of person signing)

12/7/2020

(Date)

**Chris Sorensen, manager of Sorensen
Entity Services LLC, a Trustee**

(Title of person signing)

FILING FEE \$35