

4/28/2021

Division of Corporations

Florida Department of State
Division of Corporations
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STATEMENT OF TERMINATION

Pursuant to section 605.0709(7), Florida Statutes, I hereby submit the following Statement of Termination:

FIRST: The name of the limited liability company is: HCA - Viera ALF, LLC

SECOND: The Florida Document number of the limited liability company is: L10000016572

THIRD: The date of filing of the initial articles of organization is: 02/12/2010

FOURTH: The date of filing of the dissolution is: 04/16/2021

FIFTH: This limited liability company has completed winding up its activities and affairs and has determined that it will file a statement of termination.

Natalie H. Cline
Signature of Authorized Representative

Natalie H. Cline
Typed or printed name of signature

Filing Fee: \$25.00
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