

M02-0000157K

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

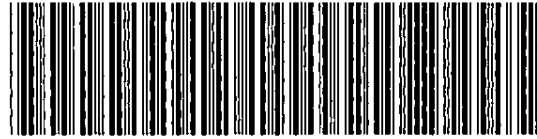
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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RECEIVED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 MAR 22 AM 8:34

MAR 23 2017  
S. YOUNG

RECEIVED  
2017 MAR 22 PM 1:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 560367 7928165

AUTHORIZATION :

COST LIMIT : \$ 25,000

ORDER DATE : March 17, 2017

ORDER TIME : 10:48 AM

ORDER NO. : 560367-470

CUSTOMER NO: 7928165

17 MAR 22 AM 8:34  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FOREIGN FILINGS

NAME: SA-PG - VERO BEACH LLC

☐ CORPORATE  
☐ LIMITED PARTNERSHIP  
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY  
☒ PLAIN STAMPED COPY  
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** SA-PG-Vero Beach, 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:

Kimberly Ruggiero

(Name of Person)

Health Care Navigator, LLC

(Firm/Company)

4 West Red Oak Lane, Suite 201

(Address)

White Plains, NY 10604

(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly Ruggiero

(Name of Person)

914

390-4325

at

(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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
17 MAR 22 AM 8:34

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

SA-PG-Vero Beach, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

06/18/2002

(Date registered with Florida Department of State)

M02000001574

(Florida Document Number)

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



(Signature of authorized representative)

Mitchell Starer

(Typed or printed name of signee)

FILED  
STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
17 MAR 22 AM 8:34

Filing Fee: \$25.00