

MO3000000170

(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:

3/3 *[Signature]*

Office Use Only



600013025816

02/28/03--01063--003 \*\*25.00

**FILED**  
03 FEB 28 AM 9:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR  
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN  
FLORIDA**

Care Level Management LLC

(Name of limited liability company)

California

(Jurisdiction of its organization)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent 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 in Florida.

23975 Park Sorrento Suite 365

(Mailing address)

Calabasas, CA 91302

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.

Carol Ryan COO

(Signature of member or authorized representative of a member)

Carol Ryan

(Typed or printed name of signee)

Filing Fee: \$25.00

FILED  
03 FEB 28 AM 9:41  
DEPARTMENT OF STATE  
HALLWAY OFFICE FLORIDA