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| (Re | equestor's Name) | | | | |
|---|--------------------|-----------|--|--|--|
| (Address) | | | | | |
| (Ad | ldress) | | | | |
| (City/State/Zip/Phone #) | | | | | |
| PICK-UP | MAIT WAIT | MAIL | | | |
| (Bu | ısiness Entity Nan | ne) | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates | of Status | | | |
| Special Instructions to Filing Officer: | | | | | |
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SECRETARY OF STATE FALLAHASSIE, FLORIDA

APR 2 8 2016 S. YOUNG

COVER LETTER

| | istration S ision of Co | ection orporations | | | |
|--|----------------------------------|---|---------------------------------|---|--|
| SUBJECT: | Senior Real Estate Holdings, LLC | | | | |
| SCHOLET | | (Name of For | eign Limited Liabilit | y Company) | |
| Dear Sir or N | Aadam: | | | | |
| The enclosed | l withdraw | al and fee(s) are submitted | d for filing. | | |
| Please return | all corres | pondence concerning this | matter to the followi | ng: | |
| Douglas (| C. Yohe | , General Counsel | | | |
| | | (Name of Person) | - | | |
| Vibra Hea | althcare | | | | |
| | | (Firm/Company) | | | |
| 4550 Len | a Drive, | Suite 225 | | | |
| | | (Address) | | _ | |
| Mechanic | sburg, l | PA 17055 | | | |
| | | (City/State and Zip Code | e) | _ | |
| For further in | nformation | concerning this matter, p | lease call: | | |
| Douglas (| C. Yohe | , General Counsel | 717 at (| 591-5737 | |
| | (Nam | e of Person) | | & 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 fo | r the following amount: | | | |
| □ \$25 Filing | g Fee | □ \$30 Filing Fee & Certificate of Status | S55 Filing Fee & Certified Copy | c □ \$60 Filing Fee, Certificate of Status & Certified Copy | |

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| Senior Real Estate Holdings, LLC | |
|---|---|
| (Name of limited liability company) | |
| Delaware | |
| (Jurisdiction of its organization) | |
| May 3, 2007 | |
| (Date registered with Florida Department of State) | |
| M0300001289 | |
| (Florida Document Number) | , 50 |
| This limited liability company is withdrawing its certificate of authority in this state. | 16 AF |
| Mon | TECRETARY OF LLLAHASSEELT |
| (Signature of authorized representative) | 5 10 10 10 10 10 10 10 10 10 10 10 10 10 |
| Michael Beaver | PHIZ: 23 |
| (Typed or printed name of signee) | |

Filing Fee: \$25.00