

M05000004843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



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TALLAHASSEE, FLORIDA

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 739474 7452534

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 25.00

ORDER DATE : July 25, 2013

ORDER TIME : 3:54 PM

ORDER NO. : 739474-010

CUSTOMER NO: 7452534

2013 JUL 25 PM 8:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FOREIGN FILINGS

NAME: HCP AL OF FLORIDA, LLC

 CORPORATE
 LIMITED PARTNERSHIP
XX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF STATUS

CONTACT PERSON: Susie Knight - EXT# 52956

EXAMINER: _____

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

HCP AL of Florida, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

M05000004843

(Florida Document Number)

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.

c/o HCP, Inc., 3760 Kilroy Airport Way, Suite 300

(Mailing address)

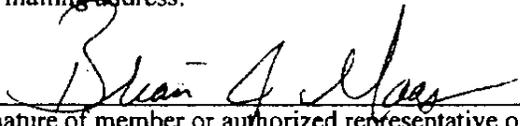
Long Beach, CA 90806

(City/State/Zip)

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



(Signature of member or authorized representative of a member)
HCP AL of Florida, LLC

By: HCP, Inc., its sole member
By: Brian J. Maas, Senior Vice President
(Typed or printed name of signee)

Filing Fee: \$25.00