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Division of Corporations

Fax Number : (850) 205-0383

Account Name

AMY J. PATTERSON: HEALTH CARE PROPERTY INVESTORS, INC.

Account Number : I20060000167

Phone

Fax Number

: (407)650-1068 : (407)835-3235

LLC DISS/WITH OR REV DISS

CNL RETIREMENT CRS1 OKLAHOMA CITY OK GP, LLC

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Help

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

CNL Retirement CRS1 Oklahoma City OK GP, LLC		
(Name of limited liability company)	-	
Delaware		_
(Jurisdiction of its organization)		
This limited liability company is no longer transacting business in Florida and surrend authority to transact business in this state.	ers its	١,
This limited liability company revokes the authority of its registered agent to accept servits behalf and appoints the Department of State as its agent for service of process based cause of action arising during the time it was authorized to transact business in Florida.	ice on d on a	 I
The second se	, , ,	. ,
420 S. Orange Avenue, Suite 500		
(Mailing address)		
Orlando, FL 32801		
(City/State/Zip)		
The limited liability company agrees to notify the Department of State in the future change in its mailing address.	of any	,
(Signature of member of authorized representative of a member)		
John Mark Ramsey		01
(Typed or printed name of signee)	07 JAN 12	SECE
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Filing Fee: \$25.00