

1106000001474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
DEC 23 2015

FILED  
2015 DEC 18 PM 4:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Montecito Medical - PW VIII, LLC

\_\_\_\_\_  
(Name of limited liability company)

Delaware

\_\_\_\_\_  
(Jurisdiction of its organization)


March 13, 2006

\_\_\_\_\_  
(Date registered with Florida Department of State)

M06000001474

\_\_\_\_\_  
(Florida Document Number)

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

  
\_\_\_\_\_  
(Signature of authorized representative)

Bridget Guy

\_\_\_\_\_  
(Typed or printed name of signee)

**Filing Fee: \$25.00**