

11  
M060000001477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

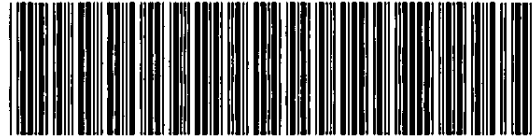
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800280108848

12/18/15--01018--010 \*\*125.00

FILED  
2015 DEC 18 PM 4:29  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
DEC 23 2015

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Montecito Medical - NW Medical Arts, LLC  
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bridget Guy

(Name of Person)

LaSalle Investment Management

(Firm/Company)

333 West Wacker Drive, 23rd Floor

(Address)

Chicago, IL 60606

(City/State and Zip Code)

For further information concerning this matter, please call:

Bridget Guy

(Name of Person)

312

at ( )

897-4129

(Area Code & 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 for the following amount:**

- |   |   |  |  |
|---|---|--|--|
| <input checked="" type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|---|---|--|--|

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

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Montecito Medical - NW Medical Arts, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)


March 13, 2006

(Date registered with Florida Department of State)

M06000001477

(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