7000003748° 1/30/2014 15: Division I

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name | : C T CORPORATION SYSTEM

Account Number : FCA00000023

Phone : (850)222-1092

Fax Number

: (850)878-5368

LLC DISSOLUTION OR WITHDRAWAL NORTH BAY MEDICAL PARTNERS, LLC

<u> </u>	Certificate of Status	0
5	Certified Copy	0
正 . ř	Page Count	03
255	Estimated Charge	\$25.00

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Corporate Filing Menu

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JAN 3 1 2013

T. HAMPTON

COVER LETTER

TO: Registration Division of	section Corporations			
SUBJECT: North	Bay Modical Partners, LLC			
-	(Name of Fo	reign Limited Liability (Company)	
Dear Sir or Madam;				
The enclosed withdr	awal and fee(s) are submitte	d for filing.		
Please return all com	espondence concerning this	matter to the following:	:	
Kathryn Gordon				
	(Name of Person)			
North Bay Medical I	Partners, LLC			
	(Firm/Company)		•	
2901 Butterfield Ro	nd			
	(Address)			
Qak Brook, IL 6052	3			
	(City/State and Zip Cod	le)	•	
For further informati	on concerning this matter, p	lease call:		
Kathryn Gordon		at (<u>630</u>	586-6178	_
(N:	eme of Person)	(Area Code &	Daytime Telephone Number)	
STREET/C	OURIER ADDRESS:	MAIL	JNG ADDRESS:	
Registration			ration Section	
Division of Corporations			on of Corporations	
Clifton Building 2661 Executive Center Circle			lox 6327 assee, Florida 32314	
	, Florida 32301	ı pılan	asset, Fioriua 32314	
Enclosed is a check	for the following amount:			
S25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

North Bay Medica	I Partners, LLC
	(Name of limited liability company)
Delaware	
	(Jurisdiction of its organization)
August 13, 2008	
	(Date registered with Florida Department of State)
M08000003760	
	(Florida Document Number)
This limited lial	pility company withdrawing its certificate of authority in this state.
	Some of the second seco
	forth Bay Medical Partners, L(S) enabling of authorized representative) by: Merit Bay Medical Associates, LCC, as fortunes united lightly company, its restauging momber; By: Inland Associates, LLCC, a Delaware limited lightly company, its softe examiner tenture, By: Inland Associates Real Estate Trust, Inc., a Maryland composition, its softe examiner tenture, By: Inland Associates Real Estate Trust, Inc., a Maryland composition, its softe examiner tenture. By: Inland Associates W. Wilton, Sucretary
_	(Typed or printed name of signee)

Filing Fee: \$25.00

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SECRETARY OF STATE
AND AN ASSEE, FLORID