Mocoobessi

(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



300321714613

12/16/05

. .

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 516648 4348715

AUTHORIZATION :

COST LIMIT : \$\sqrt{2}5.00

ORDER DATE: December 6, 2018

ORDER TIME : 11:11 AM

ORDER NO. : 516648-075

CUSTOMER NO: 4348715

FOREIGN FILINGS

NAME: P 7 HEATHBROOK OCALA LLC

CORPORATE

LIMITED PARTNERSHIP

ZZ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

ZZ CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF STATUS

CONTACT PERSON: Roxanne Turner - EXT#

EXAMINER:

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

P 7 Heathbrook Ocala LLC	
(Name of limited liability company)	~3
Delaware	
(Jurisdiction of its organization)	. ,
June 24, 2010	1
(Date registered with Florida Department of State)	
M10000002851	ಭ
(Florida Document Number)	- ;
(If an effective date is listed, the date must be specific and cannot be prior to date of fil more than 90 days after filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements date will not be listed as the document's effective date on the Department of State's (Signature of authorized representative) Wayne M. Lopkin	uirements,
(Typed or printed name of signee)	

Filing Fee: \$25.00