

MI1000000792

(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



800302289958

RECEIVED
17 AUG 14 PM 4:56

FILED
2017 AUG 14 AM 8:53
CLERK OF STATE
TALLAHASSEE, FL 32301

K. SALY
AUG 15 2017

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

ACCOUNT NO. : I20000000195

REFERENCE : 765551 7775081

AUTHORIZATION :

COST LIMIT : \$25,000

ORDER DATE : August 14, 2017

ORDER TIME : 2:59 PM

ORDER NO. : 765551-270

CUSTOMER NO: 7775081

FOREIGN FILINGS

NAME: SUNRISE NORTH NAPERVILLE
ASSISTED LIVING, L.L.C.

____ CORPORATE
____ LIMITED PARTNERSHIP
XXX LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunrise North Naperville Assisted Living, L.L.C.

(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:

Aurora Kurth

(Name of Person)

Welltower Inc.

(Firm/Company)

4500 Dorr Street

(Address)

Toledo, OH 43615

(City/State and Zip Code)

For further information concerning this matter, please call:

Aurora Kurth

(Name of Person)

at (419) 247-5724

(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:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

FILED
2017 AUG 14 AM 8:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sunrise North Naperville Assisted Living, L.L.C.

(Name of limited liability company)

Illinois

(Jurisdiction of its organization)

02/16/2011

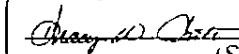
(Date registered with Florida Department of State)

M11000000792

(Florida Document Number)

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

DocuSigned by:



E9A81EFF1E4C425

(Signature of authorized representative)

Tracy W. Carte, Authorized Signatory

(Typed or printed name of signee)

Filing Fee: \$25.00