

M1100000711

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

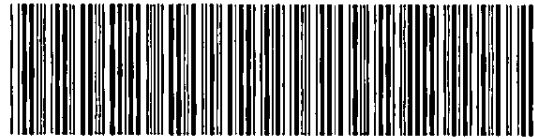
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2017 AUG 14 A 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2017 AUG 14 PM 2:11
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

n BRUCE
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 : \$ 25.00

ORDER DATE : August 14, 2017

ORDER TIME : 12:58 PM

ORDER NO. : 765551-220

CUSTOMER NO: 7775081

FOREIGN FILINGS

NAME: SUNRISE BELMONT ASSISTED
LIVING, L.L.C.

☐ CORPORATE
☐ LIMITED PARTNERSHIP
☒ LIMITED LIABILITY COMPANY

XXXX WITHDRAWAL/CANCELLATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ CERTIFIED COPY
☒ PLAIN STAMPED COPY
☐ CERTIFICATE OF STATUS

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER: _____

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sunrise Belmont 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)

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CLERK OF COURT
TALLAHASSEE, FLORIDA

FILED

For further information concerning this matter, please call:

Aurora Kurth

419

247-5724

at ()

(Name of Person)

(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

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sunrise Belmont Assisted Living, L.L.C.

(Name of limited liability company)

California

(Jurisdiction of its organization)

02/16/2011

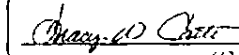
(Date registered with Florida Department of State)

M11000000799

(Florida Document Number)

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

DocuSigned by:



E9AB1EFF:E4C425

(Signature of authorized representative)

Tracy W. Carte, Authorized Signatory

(Typed or printed name of signee)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00