M11000000800

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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(Business Entity Name)				
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DIVISION OF COM DEATURES

O STIVINIONS AUG 15 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE : 765551 7775081 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE : August 14, 2017 ORDER TIME : 3:12 PM ORDER NO. : 765551-365 CUSTOMER NO: 7775081 FOREIGN FILINGS NAME: SUNRISE THIRD SCHAUMBURG SL, LLC___ 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

EXAMINER:

CONTACT PERSON: Melissa Zender - EXT#

COVER LETTER

	gistration S dision of Co				
SUBJECT:	Sunrise Third Schaumburg SL, LLC				
SOBJECT.		(Name of For	eign Limited Liability (Company)	
Dear Sir or l	Madam:				
The enclose	d withdraw	al and fee(s) are submitte	d for filing.		
Please return	n all corres	pondence concerning this	matter to the following	;	
Aurora K	urth				
		(Name of Person)		•	
Welltowe	er Inc.				
		(Firm/Company)		•	
4500 Do	rr Street				
		(Address)		•	
Toledo, (OH 4361	5			
		(City/State and Zip Cod	e)	•	
For further i	nformation	concerning this matter, p	lease call:		
Aurora K	urth		419 at (247-5724	
	(Nam	e of Person)		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 fo	r the following amount:			
□ \$25 Filin	g Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sunrise Third Schaumburg SL, LLC	
(Name of limited liability company)	
Illinois	Tolog of Land
(Jurisdiction of its organization)	9 7
02/16/2011	
(Date registered with Florida Department of State)	
M1100000800	Of the second
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this state.	
Chang to Chate Esasteff: E4C425 (Signature of authorized representative) Tracy W. Carte, Authorized Signatory	
(Typed or printed name of signee)	

Filing Fee: \$25.00