

SEGLIANT, STEPHEN E.  
TALLAHASSEE, FLORIDA

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

ACCOUNT NO. : I20000000195

REFERENCE : 765551 7775081

AUTHORIZATION

COST LIMIT

*[Signature]*  
\$ 25.00

ORDER DATE : August 14, 2017

ORDER TIME : :59 PM

ORDER NO. : 765551-240

CUSTOMER NO: 7775081

FOREIGN FILINGS

NAME: SUNRISE FLOSSMOOR 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: \_\_\_\_\_

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sunrise Flossmoor 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

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sunrise Flossmoor Assisted Living, L.L.C.

(Name of limited liability company)

Illinois

(Jurisdiction of its organization)

02/16/2011

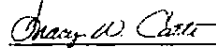
(Date registered with Florida Department of State)

M11000000818

(Florida Document Number)

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

DocuSigned by:



E9AB1EFF1E4C425

(Signature of authorized representative)

Tracy W. Carte, Authorized Signatory

(Typed or printed name of signee)

FILED  
17 AUG 14 AM 9:42  
DIVISION OF CORPORATE FILINGS

Filing Fee: \$25.00