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D. SCOTT AUG 1 5 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 765551 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE : August 14, 2017 ORDER TIME : 3:03 PM ORDER NO. : 765551-330 CUSTOMER NO: 7775081 FOREIGN FILINGS NAME: SUNRISE THIRD EAST SETAUKET 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 CONTACT PERSON: Melissa Zender - EXT#

EXAMINER:

COVER LETTER

	istration Section ision of Corporations
SUBJECT:	Sunrise Third East Setauket SL, LLC
	(Name of Foreign Limited Liability Company)
Dear Sir or M	fadam:
The enclosed	withdrawal and fee(s) are submitted for filling.
Please return	all correspondence concerning this matter to the following:
Aurora Kı	urth
	(Name of Person)
Welltowe	Inc.
	(Firm/Company)
4500 Dor	Street
	(Address)
Toledo, O	H 43615
	(City/State and Zip Code)
For further in	formation concerning this matter, please call:
Aurora Ku	217 0127
	(Name of Person) (Area Code & Daytime Telephone Number)
Regi Divis Clift 2661 Talla	EET/COURIER ADDRESS: stration Section sion of Corporations on Building Executive Center Circle check for the following amount: MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
□ \$25 Filing	

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Sunrise Third East Setauket SL, LLC	
(Name of limited liability company)	
New York	
(Jurisdiction of its organization)	
02/16/2011	
(Date registered with Florida Department of State)	
M11000000834	
(Florida Document Number)	
This limited liability company is withdrawing its certificate of authority in this sta	ite.
Oury 10 Oste— EBAB1EFF1E4C425 (Signature of authorized representative) Tracy W. Carte, Authorized Signatory	_
(Typed or printed name of signee)	-

Filing Fee: \$25.00