## M11000005308

| (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



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FILED

17 AUG II. AH 9: 00

ATTALEMENT LORDA

2017 AUG 14 PH 2: 17

S. WARREN AUG 1 5 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Tallanassee, FL 3230 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 765551 \_ 7775081

AUTHORIZATION: Com Sinder

COST LIMIT : \$25.00

ORDER DATE : August 14, 2017

ORDER TIME : 1:0 PM

ORDER NO. : 765551-250

CUSTOMER NO: 7775081

\_\_\_\_\_

## FOREIGN FILINGS

NAME: SUNRISE JOHNS CREEK GA

SENIOR LIVING, 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:

Registration Section

TO:

## **COVER LETTER**

**Division of Corporations** Sunrise Johns Creek GA Senior Living, LLC SUBJECT: (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 (Area Code & Daytime Telephone Number) (Name of Person) MAILING ADDRESS: STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: ☐ \$30 Filing Fee & □ \$55 Filing Fee & □ \$60 Filing Fee. □ \$25 Filing Fee Certificate of Status Certified Copy Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

| Sunrise Johns Creek GA Senior Living, LLC   |
|---|
| (Name of limited liability company)   |
| Georgia   |
| (Jurisdiction of its organization)  |
| 10/24/2011  |
| (Date registered with Florida Department of State)  |
| M11000005308  |
| (Florida Document Number)   |
| This limited liability company is withdrawing its certificate of authority in this state. |
| Tracy W. Carte, Authorized Signatory  |
| (Typed or printed name of signee)   |

Filing Fee: \$25.00