## M11000005327

(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.						
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Office Use Only



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1. HARRIS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 120000000195  REFERENCE : 765551 7775081  AUTHORIZATION : Fight 12000  COST LIMIT : \$ 25.00
ORDER DATE : August 14, 2017  ORDER TIME : 3:14 PM  ORDER NO. : 765551-395
CUSTOMER NO: 7775081
FOREIGN FILINGS
NAME: SUNRISE WAKE COUNTY NC 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

EXAMINER:

CONTACT PERSON: Melissa Zender - EXT#

## **COVER LETTER**

	istration ision of	Section Corporations		
SUBJECT:	Sunri	se Wake County NC	Senior Living, LL0	
Souther.	<del></del>	(Name of For	eign Limited Liability (	Company)
Dear Sir or M	Madam:			
The enclosed	d withdra	wal and fee(s) are submitte	d for filing.	
Please return	all corre	espondence concerning this	matter to the following:	
Aurora K	urth			
		(Name of Person)		
Welltowe	r Inc.			
		(Firm/Company)		
4500 Dor	r Stree	et		
		(Address)		
Toledo, C	)H 436	315		
		(City/State and Zip Cod	<b>u</b> )	
For further in	aformatic	on concerning this matter, p	lease call:	
Aurora K	urth		419	247-5724 ) Daytime Telephone Number)
	(Na	me of Person)	(Area Code &	Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAHAING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is	a check	for the following amount:		
□ \$25 Filing	g 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 Wake County NC Senior Living, LLC
(Name of limited liability company)
North Carolina
(Jurisdiction of its organization)
10/24/2011
(Date registered with Florida Department of State)
M11000005327
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Tracy W. Carte, Authorized Signature of signee)  (Typed or printed name of signee)

Filing Fee: \$25.00