

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

ACCOUNT NO. : I20000000195
REFERENCE : 765551 7775081
AUTHORIZATION : *[Handwritten Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : August 14, 2017
ORDER TIME : 12:06 PM
ORDER NO. : 765551-075
CUSTOMER NO: 7775081

2017 AUG 14 A 9:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

FOREIGN FILINGS

NAME: GILBERT AZ SENIOR LIVING
OWNER, LLC

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: Gilbert AZ Senior Living Owner, LLC
(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 at (419) 247-5724
(Name of Person) (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

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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

Gilbert AZ Senior Living Owner, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

07/03/2012

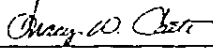
(Date registered with Florida Department of State)

M12000003759

(Florida Document Number)

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

DocuSigned by:



E9A81EFF1E4C425

(Signature of authorized representative)

Tracy W. Carte, Authorized Signatory

(Typed or printed name of signee)

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TALLAHASSEE, FLORIDA

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Filing Fee: \$25.00