

M12000005354

Florida Department of State
Division of Corporations
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To: Division of Corporations
 Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (850) 222-1092
 Fax Number : (850) 878-5368

FILED
2013 JUL 12 AM 8:19
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

LLC DISSOLUTION OR WITHDRAWAL
LENOX CARE GROUP, LLC

Certificate of Status	0
Certified Copy	0
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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LENOX CARE GROUP, 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:

COURTNEY N WIKA
(Name of Person)

COLUMBIA PACIFIC ADVISORS, LLC
(Firm/Company)

1910 FAIRVIEW AVE E STE 200
(Address)

SEATTLE, WA 98102
(City/State and Zip Code)

For further information concerning this matter, please call:

COURTNEY WIKA at 206 728-9063
(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

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

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2013 JUL 12 AM 8:16
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TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA**

FILED
2013 JUL 12 AM 8:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LENOX CARE GROUP, LLC

(Name of limited liability company)

Washington

(Jurisdiction of its organization)

M12000005334

(Florida Document Number)

This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

1910 Fairview Avenue East, Suite 200

(Mailing address)

Seattle, WA 98102

(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address



(Signature of member or authorized representative of a member)

ALEXANDER WASHBURN

(Typed or printed name of signee)

Filing Fee: \$25.00