M13000002347

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ZOZI AUG I I PM 4:0

CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195

REFERENCE: 953754 8254485

AUTHORIZATION : (

COST LIMIT : \$'25\00

ORDER DATE : August 11, 2021

ORDER TIME : 2:37 PM

ORDER NO. : 953754-015

CUSTOMER NO: 8254485

FOREIGN FILINGS

NAME: NIC 4 SUNSET LAKE OWNER LLC

CORPORATE
LIMITED PARTNERSHIP
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: Alexxis Weiland - EXT#

EXAMINER:

COVER LETTER

 $f \in \P_{n-k}$

Registration Section

TO:

Division of	Corporations		
	SUNSET LAKE OWNER	LLC	
SUBJECT:	(Name of For	eign Limited Liability	Company)
Dear Sir or Madam:			
The enclosed withdi	rawal and fee(s) are submitte	d for filing.	
Please return all cor	respondence concerning this	matter to the following	g:
JOSE TORRES			
	(Name of Person)	•	_
NEW SENIOR IN	VESTMENT GROUP INC		
	(Firm/Company)		_
55 WEST 46TH S	TREET, SUITE 2204		
	(Address)		_
NEW YORK, NY	10036		
	(City/State and Zip Cod	e)	_
For further informat	ion concerning this matter, p	lease call:	
JOSE TORRES		646 at (969-2069
(N	ame of Person)	(Area Code d	& Daytime Telephone Number)
Division P.O. Box	on Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
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

NIC 4 SUNSET LAKE OWNER LLC			
(Name of limited liability company)			_
DELAWARE			
(Jurisdiction of its organization)			_
APRIL 15, 2013			
(Date registered with Florida Department of State)			
M13000002347			
(Florida Document Number)			
This limited liability company is withdrawing its certificate of authority in this st	ate.		
Effective Date, if other than the date of filing:	_ (optional)		
If an effective date is listed, the date must be specific and cannot be prior to date			
more than 90 days after filing.)			
Note: If the date inserted in this block does not meet the applicable statutory filir his date will not be listed as the document's effective date on the Department of			
and the more of instead as the document is effective date on the population wi	ounc 51	ccora	.,.
for non			
(Signature of authorized representative)	_	•	
LORI MARINO, VICE PRESIDENT			
(Typed or printed name of signee)	-	•-	
		: ::	: ,
	:	:: 07	****
	:	07	

Filing Fee: \$25.00