

MP000007360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

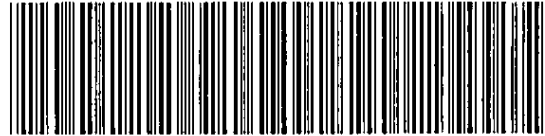
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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NOV 4 AM 11:44

ALABAMA, FLORIDA

UTS  
12-5-19

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

ACCOUNT NO. : I20000000195

REFERENCE : 074431 8254485

AUTHORIZATION

COST LIMIT \$ 25.00

ORDER DATE : December 4, 2019

ORDER TIME : 12:57 PM

ORDER NO. : 074431-095

CUSTOMER NO: 8254485

FOREIGN FILINGS

NAME: NIC 5 RENAISSANCE RETIREMENT  
LEASING 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: Kadesha Roberson - EXT#

EXAMINER: \_\_\_\_\_

19 DEC -1 10 54

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** NIC 5 Renaissance Retirement Leasing 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:

Jose Torres

\_\_\_\_\_  
(Name of Person)

New Senior Investment Group Inc.

\_\_\_\_\_  
(Firm/Company)

55 West 46th Street, Suite 2204

\_\_\_\_\_  
(Address)

New York, NY 10036

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Jose Torres

\_\_\_\_\_  
(Name of Person)

646

969-2069

at (\_\_\_\_\_) \_\_\_\_\_

(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:

- |  |   |  |  |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input type="checkbox"/> \$30 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &<br>Certified Copy | <input type="checkbox"/> \$60 Filing Fee,<br>Certificate of Status &<br>Certified Copy |
|--|---|--|--|

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19 DEC -4 AM 11:44

TALLAHASSEE, FLORIDA

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

NIC 5 Renaissance Retirement Leasing LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

April 5, 2013

(Date registered with Florida Department of State)

M13000002360

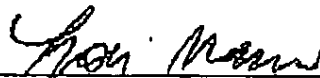
(Florida Document Number)

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

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 of filing or more than 90 days after filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.



(Signature of authorized representative)

Lori B. Marino, Vice President & General Counsel

(Typed or printed name of signee)

Filing Fee: \$25.00