

M13000004511

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF COURT REPORTERS

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**CORPORATE
ACCESS,
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- ☒ **CERTIFIED COPY** _____
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☒ **FILING** Withdrawal

1.

AG Venice Senior Housing / OPCO, LLC
(CORPORATE NAME AND DOCUMENT #)

2.

(CORPORATE NAME AND DOCUMENT #)

3.

(CORPORATE NAME AND DOCUMENT #)

4.

(CORPORATE NAME AND DOCUMENT #)

5.

(CORPORATE NAME AND DOCUMENT #)

6.

(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AG Venice Senior Housing I OPCO, 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:

Jessica French
(Name of Person)

Kayne Anderson Real Estate Advisors
(Firm/Company)

One Town Center Rd., STE 300
(Address)

Boca Raton, FL 33486
(City/State and Zip Code)

For further information concerning this matter, please call:

Jessica French
(Name of Person)

(561) 300-6255
(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 &
Certificate of Status | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

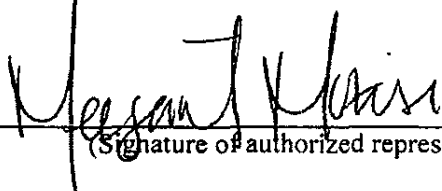
AG Venice Senior Housing I OPCO, LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

July 18th, 2013
(Date registered with Florida Department of State)

M130000045111
(Florida Document Number)

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


(Signature of authorized representative)

Meegan T. Motisi
(Typed or printed name of signee)

Filing Fee: \$25.00

FILED

16 DEC 28 AM 8:12

DIVISION OF CORPORATIONS