

M130000006650

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

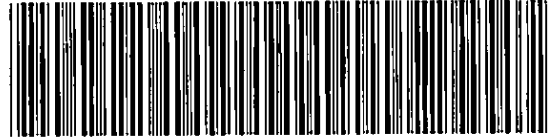
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2021 AUG 10 AM 11:49

SECRETARY OF STATE
TALLAHASSEE, FL 32301

FILED

2021 AUG 10 AM 9:31

SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

ACCOUNT NO. : I20000000195

REFERENCE : 951298 8254485

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : August 10, 2021

ORDER TIME : 11:13 AM

ORDER NO. : 951298-005

CUSTOMER NO: 8254485

FOREIGN FILINGS

NAME: NIC 10 BARKLEY PLACE 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: Alexxis Weiland - EXT#

EXAMINER: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NIC 10 BARKLEY PLACE 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:

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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:

- | | | | |
|--|---|--|--|
| <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

NIC 10 BARKLEY PLACE OWNER LLC

(Name of limited liability company)

DELAWARE

(Jurisdiction of its organization)

OCTOBER 17, 2013

(Date registered with Florida Department of State)

M13000006650

(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.

Lori Marino

(Signature of authorized representative)

LORI MARINO, VICE PRESIDENT

(Typed or printed name of signee)

FILED
2021 AUG 10 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FL

Filing Fee: \$25.00