

**7/14/000001019**  
 REQUEST ORIGINAL FILING DATE 5-20-2021

Florida Department of State  
 Division of Corporations  
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From:

Account Name : SHUTTS & BOWEN, LLP  
 Account Number : 076447000313  
 Phone : (305) 358-9165  
 Fax Number : (305) 347-7766

**LLC DISSOLUTION OR WITHDRAWAL  
 ASCEND BOCA POINTE LLC**

|                       |         |
|-----------------------|---------|
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May 21, 2021

FLORIDA DEPARTMENT OF STATE  
Division of CorporationsASCEND BOCA POINTE LLC  
500 NE SPANISH RIVER BLVD STE 108  
BOCA RATON, FL 33431SUBJECT: ASCEND BOCA POINTE LLC  
REF: M14000001019

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The Notice of Withdrawal form used is not a current form used by the Department of State. You cannot designate the Secretary of State to serve as the Registered Agent for a Withdrawal.

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Mel Solomon  
Senior Section AdministratorFAX Aud. #: H21000202698  
Letter Number: 221A00010862

P.O BOX 6327 - Tallahassee, Florida 32314

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

ASCEND BOCA POINTE LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

February 11, 2014

(Date registered with Florida Department of State)

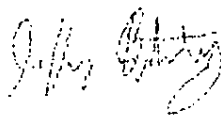
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(Florida Document Number)

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.)

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(Signature of authorized representative)

Jeffrey D. Butensky, Esq.

(Typed or printed name of signee) Authorized Person

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