M15000003428

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| ! ; |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| |
| Special Instructions to Filing Officer |
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Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

| DATE 12/21/2023 | _ | #4 | WALK IN** | | | |
|--|--|-----------------------------------|-----------|--|--|--|
| ENTITY NAME Tampa Senior Housing PROPCO, LLC | | | | | | |
| | | | | | | |
| DOCUMENT NUMBER | · | | | | | |
| | **PLEASE FILE THE ATTAC | CHED AND RETURN** | | | | |
| xxxxxxxx | Plain Copy | | | | | |
| | Certified Copy | | | | | |
| | Certificate of Status | | | | | |
| | **PLEASE OBTAIN THE FOLLOWIN Certified Copy of Arts & Amend Certificate of Good Standing | | | | | |
| | **APOSTILLE' / NOTARK | AL CERTIFICATION** | | | | |
| COUNTRY OF DESTINA | | | | | | |
| NUMBER OF CERTIFIC | ATES REQUESTEU | | | | | |
| TOTAL OWED \$25 | | ACCOUNT #: I20160000072 | | | | |
| <u> </u> | | E 8 FM | | | | |
| Please call Tina at | the above number for any iss | ues or concerns. Thank you so muc | ch! | | | |

COVER LETTER

| TO: Registratio Division of | n Section Corporations | | |
|--------------------------------|--|--------------------------------------|--|
| Tampa SUBJECT: | Senior Housing LPROPCO | , LLC | |
| SUBJECT; | (Name of For | reign Limited Liability | Company) |
| Dear Sir or Madam: | | | |
| The enclosed withdr | rawal and fee(s) are submitte | ed for filing. | |
| Please return all cor | respondence concerning this | matter to the followin | g: |
| Erika Yess | | | |
| - | (Name of Person) | | _ |
| Kayne Anderson | | | |
| | (Firm/Company) | | _ |
| I Town Center Roa | d, 3rd FL | | |
| | (Address) | | _ |
| Boca Raton, FL 334 | 86 | | |
| | (City/State and Zip Cod | (c) | _ |
| For further informat | ion concerning this matter, p | olease call: | |
| Erika Yess | | 561 at (| 300-6200 |
| (N | ame of Person) | | & 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

| Tampa Senior | Housing LPROPCO, LLC | |
|----------------|---|------------------------------|
| | (Name of limited liability company) | |
| Delaware | | |
| | (Jurisdiction of its organization) | |
| April 24, 2015 | ; | |
| | (Date registered with Florida Department of Sta | ate) |
| M1500000342 | 28 | |
| | (Florida Document Number) | |
| This limited | liability company is withdrawing its certificate of author | rity in this state. |
| Effective Da | (optional) | |
| Note: If the | 0 days after filing.) date inserted in this block does not meet the applicable st Il not be listed as the document's effective date on the De | partment of State's records. |
| | (Signature of authorized representative | 2) |
| | Meegan T. Motisi | 2023 TALL |
| | (Typed or printed name of signee) | 2023 DEC 21 AMII: 38 |

Filing Fee: \$25.00