

M1700000041615

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

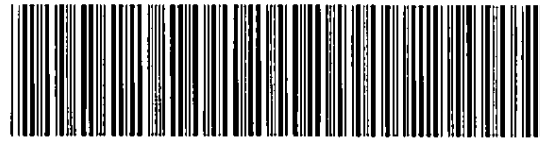
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900302635389

08/17/17--01003--002 **55.00

FILED
AUG 16 PM 3 27
TALLAHASSEE, FLORIDA

FILED
AUG 16 PM 3 27
TALLAHASSEE, FLORIDA

D SCOTT

AUG 17 2017

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

PICK UP: 8/15

- CERTIFIED COPY _____
- PHOTOCOPY _____
- CUS _____
- FILING withdrawal

1. Bradenton Senior Housing I PROPCO, 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 #)

FILED
AUG 16 1997
TALLAHASSEE, FLORIDA

SPECIAL INSTRUCTIONS: _____

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Bradenton Senior Housing I PROPCO, LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

May 30, 2017

(Date registered with Florida Department of State)

M17000004615

(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)

Meeagan T. Motisi

(Typed or printed name of signee)

FILED
17
MAY 16 11 27

Filing Fee: \$25.00