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Florida Department of State

Division of Corporations Public Access System

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 603503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIMBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Management, LLC [Name of Foreign Limit	4-41	hills Company)			
	fasme or roteilu rum	(160)	anding Company)			
Delaware		3.	20-1363684			
Jurisdiction under the	law of which foreign limited liab;	ity	(FEI number, if	applicable)		
April 19, 2004	,	_ 5.	Perpetual			
(Date	of Organization)		(Duration: Year limited liabili exist or "perpetual")	il combana	will cas	se to
date of filing		~		<u> </u>		~_
	(Date first transacted business) (See sections 608.501 & 608.502				選	EF.
330 N. Wabash Ave	we, Suite 1400, Chicago, IL 60611				10.35 10.35	#(####################################
					8	% ************************************
	(Street Add	ress o	(Principal Office)		>	-100M
If limited liability	company is a manager-mana	ged c	ompany, check here 🔀	* *	ఫ్లా ఆ	
•					~	
Mark J. Schulte, 33	N. Wabach Avo., Ste. 1400, Chica	go, IL	60611			
						
	certificate of existence, no more than					
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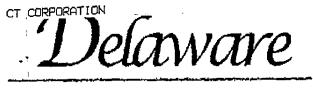
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Brookdale Provident M	lanascment, LLC			
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2. The name and the	e Florida street addre	as of the registered a	gent and office a	re:
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	1	(Name)		ART SE
				रुह्य ।
	12	00 South Pine Island Ros	ad	
	Florida Street A	Address (P.O. Box NOT	ACCEPTABLE)	= = = = = = = = = = = = = = = = = = =
				<u>54</u> 5
_	Plantation	FL	33324	- ST 5
		City/State/Zip		
	i			
	as registered agent an	nd to accept service of	process for the a	bove stated limited
Having been named				
liability company at	the place designated in			
liability company at agent and agree to a	the place designated in act in this capacity. If i	urther agree to comply	y with the provisi	ons of all statutes
liability company at agent and agree to a relating to the prope	the place designated in act in this capacity. If it and complete perform	urther agree to comply mance of my duties, at	y with the provisi nd I am familiar v	ons of all statutes with and accept the
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\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



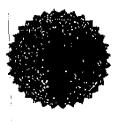
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BROOKDALE PROVIDENT MANAGEMENT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FIRST DAY OF SEPTEMBER, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

SECRETARY OF STATE.



3790836 8300 040638039 Warnet Smith Hindren
Harrier Smith Windson, Secretary of State

AUTHENTICATION: 3328309

DATE: 09-01-04