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		lle 14 LLC	To the second
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Profit		Amendment	
Non Profit		Resignation of RA O	fficer/Director
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Domestication		Dissolution/Withdrav	val
Other		Merger	1
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Annual Reports		Foreign	
Fictitious Name	X	Limited Liability	
Name Reservation		Reinstatement	
Reinstatement		Trademark	
		Other	

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Ī.	SUMMERVILLE 14 LLC			TASE OF
	(Name	of Foreign Limited Li	ability Company)	是是一
2	DELAWARE	3.	APPLIED FOR	题。
	risdiction under the law of which fore mpany is organized)	ign limited liability	(FEI number, if	applicable
4.	03/10/2005	5.	PERPETUAL	70, 00
	(Date of Organization)		(Duration: Year limited liabili exist or "perpetual")	ty company will rease to
6.	UPON FILING			7
****	(Date first trans (See sections 60)	sacted business in Flor 8.501 & 608,502 F.S. t	ida, if prior to registration.) o determine penalty liability)	
7	3000 EXECUTIVE PARKWAY	SUITE 530		
	SAN RAMON CA 94583			
-		(Street Address of	Principal Office)	
8. If	limited liability company is a n	nanager-managed c	ompany, check here 🔽	
9. T	he name and usual business add	resses of the manag	ging members or managers	are as follows:
_	SUMMERVILLE INVESTORS, I	тс		
	3000 EXECUTIVE PARKWAY	SUITE 530		
_	SAN RAMON CA 94583			
the jui transli	uttached is an original certificate of existentistication under the law of which it is organized on the certificate under oath of the t	ganized. (A photocopy i ranslator must be submi	is not acceptable. If the certificate is tited.)	
11. ]	Nature of business or purposes t	o be conducted or p	promoted in Florida:	
·	SENIOR RES	SIDENTIAL AND ASS	SISTED LIVING FACILIITES	
	ŕ	San Ol		
			orized representative of a n	
	(In accordance with an affirmation und	h section 608.408(3), F.S. ler the penalties of perium	, the execution of this document con that the facts stated herein are true.	stitutes )
		GARY CHA		
	<del></del>	Typed or printed n	ame of signee	<del></del>

### 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.

1. The name	of the Limited Liability Com	mpany is:		
	SUMMERVILLE 14 LLC			
2. The name	and the Florida street address	s of the registe	red agent and offic	e are:
	HIQ CORPORATE SERV	ICES, INC.		
		(Name)		
	528 EAST PARK AVENUE	E .		
	Florida Street Ad	idress (P.O. Box	NOT ACCEPTABLE)	<del></del>
	TALLAHASSEE	FL City/State/	32301 Zip	
liability compo agent and agra relating to the obligations of	named as registered agent and any at the place designated in ee to act in this capacity. I fur proper and complete perform my position as registered agents SERVICES, INC.  (Signature)	this certificate rther agree to c ance of my du	, I hereby accept the comply with the prov ties, and I am famili	e appointment as registered visions of all statutes ar with and accept the

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

PAGE 1

## Delaware

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUMMERVILLE 1A 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 THIRTEENTH DAY OF MAY, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUMMERVILLE 14 LLC" WAS FORMED ON THE TENTH DAY OF MARCH, A.D. 2005.

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



3938292 8300

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Warriet Smith Hundson Harriet Smith Windson Secretary of State

arries Smith Windsor, Secretary of State

AUTHENTICATION: 3877628

DATE: 05-13-05