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05 JUN 21 AN II: 24 SECRETARY OF STATE



TRANSMITTAL LETTER

TO: Registration S Division of C		
SUBJECT:	SUMMERVILLE A	AT GAINESVILLE, LLC
	(Name of I	Limited Liability Company)
Florida," Certificate	· -	Liability Company for Authorization to Transact Business in re submitted to register the above referenced foreign limited la
Please return all corr	espondence concerning th	is matter to the following:
	JC STROTT	Eu S
		(Name of Person)
	HIQ COMPANIES	
		(Firm/Company)
	516 NORTH CHAI	RLES STREET 5TH FLOOR
	310110111101111	(Address)
	BALTIMORE MD	21201
		y/State and Zip Code)
		-
For further informati	on concerning this matter,	please call:
	JC STROTT	at (800) 564-5300
	(Name of Person)	(Area Code & Daytime Telephone Number)
STREET AI	DRESS:	MAILING ADDRESS:
Registration :		Registration Section
		Division of Corporations
409 E. Gaine		P.O. Box 6327
Tallahassee,	Florida 32399	Tallahassee, Florida 32314
Enclosed is a check t	for the following amount:	
□ \$125.00 Filir		e & \$\Bigsis \$155.00 \text{ Filing Fee & \$\mathbb{Z}\$160.00 \text{ Filing Fee, Certificate} \\ text{te of Status & Certified Conv.} \text{of Status & Certified Conv.} \end{array}

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: SUMMERVILLE AT GAINESVILLE, LLC (Name of Foreign Limited Liability Company) **DELAWARE** (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 6-15-200**5** exist or "perpetual") **UPON FILING** (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 3000 EXECUTIVE PARKWAY SUITE 530 SAN RAMON CA 94583 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 9. The name and usual business addresses of the managing members or managers are as follows: SUMMERVILLE SENIOR LIVING, INC. 3000 EXECUTIVE PARKWAY SUITE 530 SAN RAMON CA 94583 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: ASSISTED LIVING AND SENIOR RESIDENTIAL FACILITIES Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the population of perjury that the facts stated herein are true.)

Typed or printed name of signed

GARY CHAN

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 Company is:		
SUMMERVILLE AT GAINESVILLE, LLC	91 -11	
2. The name and the Florida street address of the registered agent and office are:	JUN 2	
HIQ CORPORATE SERVICES, INC.	第二星	
(Name)		
526 EAST PARK AVENUE	RIGH	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	•	
TALLAHASSEE FL 32301		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all strelating to the proper and complete performance of my duties, and I am familiar with and accobligations of my position as registered agent as provided for in Chapter 608, Florida Statut HIQ CORPORATE SERVICES. INC.	as registered tatutes cept the	

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SUMMERVILLE AT GAINESVILLE, 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 TWENTIETH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SUMMERVILLE AT GAINESVILLE, LLC" WAS FORMED ON THE FIFTEENTH DAY OF JUNE, A.D. 2005.

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





Warriet Smith Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3960969

DATE: 06-20-05

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