

C T CORPORATION SYSTEM	
660 East Jefferson Street	·
Requestor's Name	
Tallahassee, Florida 32301	<u> </u>
Address (850) 222-1092	
City State Zip Phone	11/00/00 01000005
CORPORATION(S) NA	****346.25 ****346.25
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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: 1. Jacksonville Retirement Residence LLC (Name of foreign limited liability company must end with the words "limited liability company" or "limited company" or their abbreviations "L.L.C." or "L.C." if not so contained in the name at present.) 3. applied for 2.Oregon (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) 5 December 31, 2023 4 November 4, 1998 (Duration: Year limited liability company will (Date of Organization) cease to exist or "perpetual") (Date first transacted business in Florida. (See sections 608.501, 608.502 and 817.155, F.S.) 7. 2250 McGilchrist St. SE, Salem, OR 97302 (Street address of principal office) 8. List name, title, and business address of each managing member [MGRM] or manager [MGR] who will manage the foreign limited liability company in Florida: (attach additional page if necessary) NAME & ADDRESS: TITLE: TITLE: NAME & ADDRESS: William E. Colson MGR 2250 McGilchrist St. SE, Salem, OR 97302 Daniel R. Baty MGR 3131 Elli OH AVE, State 500 Seattle, WA 9812 MGR Norman L. Brenden 2250 McGilchrist St.

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state under the law of which it is organized. (A hotocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

SE, Salem, OR 97302

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:			
	Jacksonville Retirement Residence LLC			
2.	The name and the Florida street address of the registered agent and office are:			
	C T CORPORATION SYSTEM			
	(Name)			
	(Inditie)			
	1200 South Pine Island Road			
	Florida street address (P.O. Box NOT ACCEPTABLE)			
	Plantation FL 33324			
	(Cíty/State/Zip)			

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T CORPORATION SYSTEM

(Signature)
Kathleen C. Gareipy, Asst. S

Filing Fee: \$35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	Retirement
Residence LLC certifies:	5.51
1) the above named limited liability company has at least two members;	
2) the total amount of cash contributed by the member(s) is	\$ <u> </u>
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	\$515,000;
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>515,00</u> 0
Signature of a member or authorized representative of a memb	er.
and 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$ <u>919,00</u> 0

affidavit constitutes an affirmation under the penalties of perjury that the facts

William E. Colson

Typed or printed name of signee

stated herein are true.)

Filing Fee: \$250.00 for Application and Affidavit

Description of property:

Bare land located in Jacksonville, Florida.

DIVISION OF PM 2: 54

CERTIFICATE

State of Oregon

OFFICE OF THE SECRETARY OF STATE Corporation Division

I, PHIL KEISLING, Secretary of State of Oregon, and Custodian of the Seal of said State, do hereby certify:

JACKSONVILLE RETIREMENT RESIDENCE LLC

was organized under the Oregon

Limited Liability Company Act

on

November 4, 1998

and is active on the records of the Corporation Division as of the date of this certificate.



In Testimony Whereof, I have hereunto set my hand and affixed hereto the Seal of the State of Oregon.

PHIL KEISLING, Secretary of State

Ву

Catherine K. Staples

November 4, 1998

SECRETARY OF STATE ON SINGISTON OF PH 2: 54