

B94000000201

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

RE-SUBMIT

From:

Account Name : C T CORPORATION SYSTEM
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Phone : (850) 222-1092
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Please retain original filing
date of submission 4/26/10

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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LP/LLP AMENDMENT/RESTATEMENT/CORRECTION
SUNRISE ASSISTED LIVING LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
Page Count	7
Estimated Charge	\$52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

MAY 19 2010

EXAMINER

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 18 AM 8:28
4/26/2010



May 6, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations

SUNRISE ASSISTED LIVING LIMITED PARTNERSHIP

7902 WESTPARK DRIVE

ATTN: LEGAL DEPT

MCLEAN, VA 22102

SUBJECT: SUNRISE ASSISTED LIVING LIMITED PARTNERSHIP

REF: B94000000201

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. A translation of the certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton

Regulatory Specialist II

Registration/Qualification Section

FAX Aud. #: H10000098220

Letter Number: 510A00010294



April 27, 2010

FLORIDA DEPARTMENT OF STATE

Division of Corporations
SUNRISE ASSISTED LIVING LIMITED PARTNERSHIP
7902 WESTPARK DRIVE
ATTN: LEGAL DEPT
MCLEAN, VA 22102

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If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: E10000098220
Letter Number: 510A00010294

**AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR
FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP**

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:

Sunrise Assisted Living Limited Partnership

2. The jurisdiction of its formation is: Virginia

3. The date the entity was authorized to transact business in Florida is: May 31, 1994

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

Sunrise Senior Living Investments, Inc.

7900 Westpark Dr., Ste. T900
McLean, VA 22102

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 18 AM 6:28

6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

☐ The entity elects to be a limited liability limited partnership.

☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:

David Haddock, Vice President & Secretary

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

SEVENTH FLORIDA
DIVISION OF CORPORATIONS
10 MAY 18 AM 8:28

Commonwealth of Virginia



State Corporation Commission

I Certify the Following from the Records of the Commission:

The foregoing is a true copy of the certificate of amendment filed in this office on May 13, 2010 by SUNRISE ASSISTED LIVING LIMITED PARTNERSHIP, a VIRGINIA Limited Partnership.

Nothing more is hereby certified.



*Signed and Sealed at Richmond on this Date:
May 13, 2010*

Joel H. Peck

Joel H. Peck, Clerk of the Commission



LPA-73.12
(04/08)

COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION
CERTIFICATE OF AMENDMENT OF A
CERTIFICATE OF LIMITED PARTNERSHIP

The undersigned, on behalf of the limited partnership set forth below, pursuant to Title 50, Chapter 2.1 of the Code of Virginia, state(s) as follows:

1. The name of the Virginia limited partnership is
Sunrise Assisted Living Limited Partnership
2. The initial certificate of limited partnership was filed with the State Corporation Commission on May 5, 1994
3. The certificate of limited partnership is amended as follows (complete appropriate subsection(s)):
A. The name of the limited partnership has changed to

- B. The post office address, with the street and number, if any, of the specified office where the records are maintained pursuant to § 50-73.8 of the Code of Virginia has changed to

(number/street)	(city or town)	(state)	(zip)
C. Each general partner's name; post office address, with the street and number, if any; jurisdiction under whose laws it is incorporated, organized or formed (if a business entity); and assigned SCC ID number, if any, that has withdrawn are:			
Sunrise Assisted Living Investments, Inc.	0410231-5	Virginia	
(name of general partner)	(SCC ID #, if assigned)	(jurisdiction of organization)	
7900 Westpark Dr., Ste. T900	McLean	VA	22102
(number/street)	(city or town)	(state)	(zip)

- D. The limited partnership shall continue in business under § 50-73.49 of the Code of Virginia after an event of withdrawal of a general partner.

(number/street)	(city or town)	(state)	(zip)
E. Each new general partner's name; post office address, with the street and number, if any; jurisdiction under whose laws it is incorporated, organized or formed (if a business entity); and assigned SCC ID number, if any, that has been admitted are:			
Sunrise Senior Living Investments, Inc.	0410231-5	Virginia	
(name of general partner)	(SCC ID #, if assigned)	(jurisdiction of organization)	
7900 Westpark Dr., Ste. T900	McLean	VA	22102
(number/street)	(city or town)	(state)	(zip)

Check and complete if applicable:

- ☐ Each of the following new general partners is serving, without more, as a general partner of the limited partnership and does not otherwise transact business in Virginia. See §§ 13.1-767, 13.1-1059 and/or 50-73.61 of the Code of Virginia.

F. Other amendments:

Signature(s) of general partner(s):

Susan L. Timoner

Susan L. Timoner, Vice President

(printed name and title)

5-7-10

(date)

(telephone number (optional))

(signature)

(date)

(printed name and title)

(telephone number (optional))

(limited partnership's SCC ID No.)

PRIVACY ADVISORY: Information such as social security number, date of birth, maiden name, or financial institution account numbers is NOT required to be included in business entity documents filed with the Office of the Clerk of the Commission. Any information provided on these documents is subject to public viewing.

SEE INSTRUCTIONS ON THE REVERSE