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(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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OFFICIENCY OF FILING

And

JUL 11 2014

R. WHITE



ACCOUNT NO. : I2000000195 REFERENCE : 207974 7373120 AUTHORIZATION : 1 COST LIMIT : /\$, 35.00 ORDER DATE : July 8, 2014 ORDER TIME : 9:05 AM ORDER NO. : 207974-005 CUSTOMER NO: 7373120 FOREIGN FILINGS NAME: SNH LTA PROPERTIES TRUST XX TRUST ____ LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX AMENDMENT PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY _____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Emily Gray -- EXT# 62925

EXAMINER:





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Amendment by Foreign Trust

-AFFIDAVIT BY FOREIGN CORPORATION TO CHANGE/ADD OFFICER(S) -AND/OR DIRECTOR(S)

	(Note: Applicable only during the first of	calendar year of qualification)	
1.	The name of the foreign corporation as it appears on t SNH/LTA Properties Trust	he records of the Florida Department of State is:	
2.	This entity was authorized to transact business in Flor number is D06000000024	ida on 8/31/2006 and its Florida document	
3.	This corporation was formed under the laws of Maryla	and	
4.	The name and address of each officer and/or director is	is as follows:	
<u>Title:</u> President, Chief Operating Officer & Assistant Secretary		Name and Address David J. Hegarty	
		Two Newton Place, 255 Washington Street,	Suite 300
		Newton, MA 02458	
Treasurer & Chief Financial Officer		Richard A. Doyle	
		Two Newton Place, 255 Washington Street,	Suite 300
		Newton, MA 02458	
Secretary		Jennifer B. Clark	
		Two Newton Place, 255 Washington Street,	Suite 300
		Newton, MA 02458	
A	ssistant Secretary	Jacquelyn S. Anderson	
		Two Newton Place, 255 Washington Street,	Suite 300
		Newton, MA 02458	
).	(Attach additional pages i	f necessary)	
٠ ر	huldyla	Treasurer & Chief Financial Officer	
safir.	ra at an atticar or director	Title of manager of the contract	

Signature of an officer or director

Richard A. Doyle

Typed or printed name of person signing

Title of person signing

FILING FEE \$35

Make checks payable to Florida Department of State and Mail to: Division of Corporations • PO Box 6327 • Tallahassee, FL 32314

COVER LETTER

Division of Corporations	
SUBJECT:SNH LTA Properties Trust	
N N	Name of Corporation
DOCUMENT NUMBER: D06000000024	
The enclosed Affidavit by Foreign Corporation submitted for filing.	tion to Change/Add Officer(s) and/or Director(s) and fee ar
Please return all correspondence concerning th	this matter to the following:
Robert Branch	
Name of Contact Person	
Corporation Service Company	
Firm/Company	
84 State Street	
Address	
Boston, MA 02109	
City/State and Zip Code	
fkirkpatrick@cscinfo.com	
E-mail address: (to be used for future annual	al report notification)
For further information concerning this matter	er, please call:
Melissa Welin	617 796-8117
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check made payable to the Florid	rida Department of State for the following amount:
\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) \$52.50 Filing Fee, Certified Copy (Additional copy is enclosed)
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301