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(Requ	estor's Name)	
(Addre	ess)	
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(City/S	state/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Busin	ess Entity Nan	ne)
(Docu	ment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fili	ng Officer;	

Office Use Only



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Filing Cover Sheet

To:	Florida	Division	of Cor	porations
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From: TAYLOR SEAY C/O Capitol Services, Inc.

Date: 8/16/2022

Trans#: 1319206

[Entity Name: INSPIRED SENIOR LIVING OF FORT MYERS DST. ?

Good Standing () Certificate of Fact ()

Articles Incorporation/Formation ()	Articles of Amendment ()	;
Articles of Dissolution ()	Annual Report ()	, G
Conversion ()	Fictitious Name ()	AH IU:
(Foreign Qualification (XX - TRUST)	Limited Liability ()	1: 48
Limited Partnership ()	Merger ()	
Reinstatement ()	Withdrawal / Cancellation ()	
Other ()		
STATE FEES PREPAID WITH CHECK# 2884	FOR \$358:75	
PLEASE RETURN:		
Certified Copy (XX) Plain Photoc	ору ()	



Filing Cover Sheet

To: Florida Division of Corporations

From: TAYLOR SEAY C/O Capitol Services, Inc.

Date: 8/16/2022

Trans#: 1319206



Articles Incorporation/Formation ()

Articles of Dissolution ()

Conversion ()

Foreign Qualification (XX - TRUST)

Limited Partnership ()

Reinstatement ()

Other ()

STATE FEES PREPAID WITH CHECK# 2884 FOR \$358.75

PLEASE RETURN:

Certified Copy (XX) Plain Photocopy ()

Good Standing () Certificate of Fact ()

FILED FACEARTH AND LE

Phone: 855-498-5500

AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE TO FILE OR QUALIFY

Inspired Senior Living of Fort Myers DST A Delaware statutory TRUST In accordance with Section 609.02 of the Florida Statutes, pertaining to Common Law Declarations of Trust, the undersigned, the Chairman of the Board of Trustees of _Inspired Senior Living of Fort Myers DST (Name of Trust) Delaware statutory Trust hereby affirms in order to file or qualify (State) Inspired Senior Living of Fort Myers DST in the State of Florida. (Name of Trust) 1. Two or more persons are named in the Trust. 2. The principal address is 7047 E Greenway Parkway, Suite 300 Scottsdale, AZ 85254 3. The registered agent and street address in the State of Florida is: Capitol Corporate Services, Inc. 515 E. Park Avenue, 2nd Floor Tallahassee, FL 32301 4. Acceptance by the registered agent: Having been named as registered agent to accept service of process for the above named Declaration of Trust at the place designated in this affidavit. I hereby accept the appointment as registered agent and agree to act in this capacity. Taylor Seay, Asst. Secretary on behalf of Capitol Corporate Services. Inc. (Signature of Registered Agent) 5. I certify that the attached is a true and correct copy of the Declaration of

Trust under which the association proposes to conduct its business in Florida.

Name Chris Sorensen

Name Chris Sorensen

Manager of Sorensen Entity Services LLC, a trustee

PUBLIC

REG # 7918892

MY COMMISSION

EXPIRES

Certified Copy: \$ 8.75 (optional) fore me this 15 day of Angust

Control of the Declaration of Declaration of Trust under the declaration of Trust unde

Delaware The First State

Page 1

ENERGY POTTONIENT CONTRACT CO

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT
COPIES OF ALL DOCUMENTS ON FILE OF "INSPIRED SENIOR LIVING OF
FORT MYERS DST" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE FOURTH DAY OF MAY, A.D. 2022, AT 4:05 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID

CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE

AFORESAID STATUTORY TRUST, "INSPIRED SENIOR LIVING OF FORT MYERS

DST".



Authentication: 204170577

Date: 08-16-22

State of Delaware Secretary of State Division of Corporations Delivered 04:05 PM 05:04/2022 FILED 04:05 PM 05:04/2022 SR 20221782793 - File Number 6780112

STATE of DELAWARE CERTIFICATE of TRUST

FACE TAY OF STATE OF A PROPERTY AND A PROPERTY AND

This Certificate of Trust is filed in accordance with the provisions of the Delaware Statutory Trust Act (Title 12 of the Delaware Code, Section 3801 et seq.) and sets forth the following:

rst: The name of the trust is	Inspired Senior Living of Fort Myers DS1			
econd: The name and address of the Delaware trustee is				
Sorensen Entity Services LLC Wilmington, Delaware 19801-	, located at 1201 N. Orange Street, Suite 7044, -1189.			
nird: (Insert any other informa	ation the trustees determine to include therein.)			

SORENSEN ENTITY SERVICES LLC

By:

Frustec(8) Chris Sorensen, Manager of Sorensen

Name: Entity Services LLC, the Delaware trustee

Typed or Printed