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AC ACCEPTANCE OF THE PARTY OF T

DIVISION OF CORPORATIONS

22 SEP - 1 PM 3: 16



Filing Cover Sheet

To: Florida Division of Corporations From: TAYLOR SEAY C/O Capitol Services, Inc. Date: 9/1/2022 Trans#: 1323237 Entity Name: INSPIRED SENIOR LIVING OF WELLINGTON DST Articles Incorporation/Formation () Articles of Amendment () Annual Report () Articles of Dissolution () Conversion () Fictitious Name () [Foreign Qualification (XX-DST)] Limited Liability () Merger () Limited Partnership () Withdrawal / Cancellation () Reinstatement () Other () STATE FEES PREPAID WITH CHECK#2924 FOR \$358.75 **PLEASE RETURN:** Certified Copy (XX) Plain Photocopy ()

Certificate of Fact ()

Good Standing ()

AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE TO FILE OR QUALIFY

Inspired Senior Living of Wellington 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 Wellington DST (Name of Trust) Delaware statutory Trust hereby affirms in order to file or qualify (State) Inspired Senior Living of Wellington DST ______, in the State of Florida. (Name of Trust) 1. Two or more persons are named in the Trust. 2. The principal address is _______ 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 Ave. Floor 2, 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. Toylor Suy Taylor Seay, Asst. Sec. (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

Manager of Sorensen Entity Services Hidi Cota trustee Chester

Commonwealth/State of Virginia The foregoing instrument was acknowledged before me this 3 day of Angust,

Filing Fee:

\$350.00

Certified Copy: \$ 8.75 (optional) 2022

My Commission Expires: 3|31

<u>Delaware</u>

The First State

Page 1

22 SEP - 1 PM 3: 16

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
WELLINGTON DST' AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE ELEVENTH DAY OF JULY, A.D. 2022, AT 5:37 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 WELLINGTON

DST'.



Authentication: 203906627 Date: 07-13-22

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Firey W. Budluck, Socretary of State

State of Delaware
Secretary of State
Division of Corporations
Delivered 05:37 PM 07/11/2022
FILED 05:37 PM 07/11/2022
SR 20222957518 - File Number 6905879

STATE of DELAWARE CERTIFICATE of TRUST

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:

First: The name of the trust is	Inspired Senior Living of Wellington DST
Second: The name and address of	f the Delaware trustee is
Sorensen Entity Services LLC. Wilmington, Delaware 19801-	, located at 1201 N. Orange Street, Suite 7044, 1189.
Third: (Insert any other information	tion the trustees determine to include therein.)
	SORENSEN ENTITY SERVICES LLC
	By: Frastee(8) Chris Sorensen, Manager of Sorensen
	Name: Entity Services LLC, the Delaware trus Typed or Printed