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(Requestor's Name)

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(City/State/Zip/Phone #)

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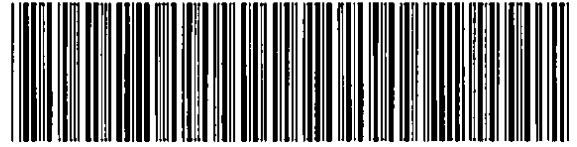
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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S. CHATHAM  
SEP - 2 2022

09/02/22--01001--009 \*\*358.75

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DIVISION OF CORPORATIONS  
22 SEP - 1 PM 3:27

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ATTENTION



**CAPITOL  
SERVICES**

## **Filing Cover Sheet**

**To:** Florida Division of Corporations

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

**Date:** 9/1/2022

**Trans#:** 1323224

**Entity Name:** INSPIRED SENIOR LIVING OF ST. PETERSBURG DST

Articles Incorporation/Formation ( )

Articles of Amendment ( )

Articles of Dissolution ( )

Annual Report ( )

Conversion ( )

Fictitious Name ( )

~~Foreign Qualification (XX-DST)~~

Limited Liability ( )

Limited Partnership ( )

Merger ( )

Reinstatement ( )

Withdrawal / Cancellation ( )

Other ( )

~~STATE FEES PREPAID WITH CHECK #2925 FOR \$358.75~~

### **PLEASE RETURN:**

~~Certified Copy (XX)~~ Plain Photocopy ( )

Good Standing ( ) Certificate of Fact ( )

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE  
TO FILE OR QUALIFY**

Inspired Senior Living of St. Petersburg 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 St. Petersburg DST, a

(Name of Trust)

Delaware statutory Trust hereby affirms in order to file or qualify

(State)

Inspired Senior Living of St. Petersburg 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 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.

*Taylor Seay*

**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 LLC, a trustee

Filing Fee: **\$350.00**

Certified Copy: **\$ 8.75 (optional)**

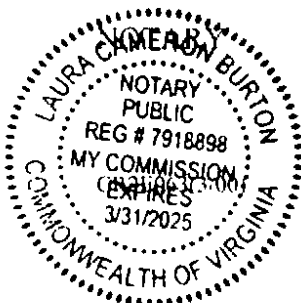
County/City of Chesterfield  
Commonwealth/State of Virginia

The foregoing instrument was acknowledged before me this 31 day of August

2022 by Christopher Sorensen

(Name of person seeking acknowledgment)

*Laura C. Burton*  
Notary Public



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# Delaware

The First State

Page 1

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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 ST. PETERSBURG DST" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF STATUTORY TRUST REGISTRATION, FILED THE EIGHTH DAY OF APRIL, A.D. 2022, AT 9:52 O'CLOCK A.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 ST. PETERSBURG DST".



  
Jeffrey W. Bullock, Secretary of State

6726659 8100H  
SR# 20223425546

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

Authentication: 204301178  
Date: 09-01-22

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## 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 St. Petersburg DST

• **Second:** The name and address of the Delaware trustee is

Sorensen Entity Services LLC, located at 1201 N. Orange Street, Suite 7044,  
Wilmington, Delaware 19801-1189.

• **Third:** (Insert any other information the trustees determine to include therein.)

SORENSEN ENTITY SERVICES LLC

By:   
Trustee(s)

Chris Sorensen, Manager of Sorensen  
Name: Entity Services LLC, the Delaware trustee  
Typed or Printed