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(Requestor's Name)

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(City/State/Zip/Phone #)

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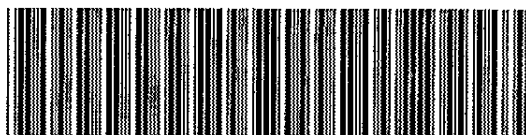
(Business Entity Name)

(Document Number)

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**SHELL BRAY AYCOCK ABEL & LIVINGSTON PLLC**

ATTORNEYS AND COUNSELLORS AT LAW

SUITE 1500 RENAISSANCE PLAZA

230 NORTH ELM STREET

GREENSBORO, NORTH CAROLINA 27401

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WRITER'S DIRECT DIAL NUMBER

(336) 370-8815

WRITER'S E-MAIL ADDRESS

bberkowitz@sbaal.com

July 25, 2006

**FEDERAL EXPRESS**

Florida Department of State  
Registration Section-Corporations Division  
2661 Executive Center  
Tallahassee, Florida 32301  
**Corporations Division**

Re: Application by Foreign Corporation for of Authorization to Transact Business in  
Florida:  
**Lexington Manor GP, Inc.**

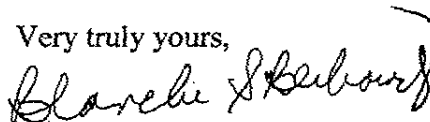
Dear Sir or Madam:

Enclosed please find the above-noted Application to be filed in Florida.

Please file, and return the certified copy to me. I have enclosed a check in the amount of \$87.50 in payment of the filing, certified copy and certificate fee.

Please call me if you have any questions concerning this matter. Thank you for your assistance.

Very truly yours,



Blanche S. Berkowitz, NCCP  
Corporate Paralegal

/bsb

Enclosures

cc: Barbara R. Christy

**COVER LETTER**

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DIVISION OF CORPORATIONS  
06 JUL 27 PM 2:31

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Lexington Manor GP, Inc.

(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Blanche S. Berkowitz, NCCP

(Name of Person)

Schell Bray Aycock Abel & Livingston PLLC

(Firm/Company)

230 N. Elm Street, Suite 1500

(Address)

Greensboro, NC 27401

(City/State and Zip code)

For further information concerning this matter, please call:

Blanche S. Berkowitz at ( 336 ) 370-8815

(Name of Person)

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☒ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

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1. Lexington Manor GP, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. North Carolina

(State or country under the law of which it is incorporated)

3. 20-5224087

(FEI number, if applicable)

4. July 18, 2006

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 300 N. Greene Street, Suite 1000, Greensboro, NC 27401

(Principal office address)

300 N. Greene Street, Suite 1000, Greensboro, NC 27401

(Current mailing address)

8. Any lawful activity under statutes.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Tim Cook

Office Address: 1825 Ridgewood Avenue

Holly Hill

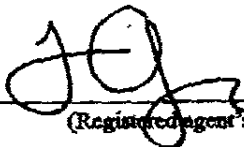
(City)

Florida 32117

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Edward M. Harrington

Address: 300 N. Greene Street, Suite 1000, Greensboro, NC 27401

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Edward M. Harrington

Address: 300 N. Greene Street, Suite 1000, Greensboro, NC 27401

Vice President: Jon Bell

Address: 300 N. Greene Street, Suite 1000, Greensboro, NC 27401

Secretary: David Bell

Address: 300 N. Greene Street, Suite 1000, Greensboro, NC 27401

Treasurer: \_\_\_\_\_

Address: \_\_\_\_\_

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Edward M. Harrington

(Signature of Director or Officer listed in number 12 of the application)

14. Edward M. Harrington, President

(Typed or printed name and capacity of person signing application)

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# NORTH CAROLINA

## Department of The Secretary of State

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DIVISION OF CORPORATIONS  
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### CERTIFICATE OF EXISTENCE

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

### LEXINGTON MANOR GP, INC.

is a corporation duly incorporated under the laws of the State of North Carolina, having been incorporated on the 18th day of July, 2006, with its period of duration being Perpetual.

I FURTHER certify that, as of the date set forth hereunder, the said corporation's articles of incorporation are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said corporation is not administratively dissolved for failure to comply with the provisions of the North Carolina Business Corporation Act; that its most recent annual report required by N.C.G.S. 55-16-22 has been delivered to the Secretary of State; and that the said corporation has not filed articles of dissolution as of the date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 25th day of July, 2006.

*Elaine F. Marshall*

Secretary of State