

F96000002076

Document Number Only

CT CORPORATION SYSTEM

Requestor's Name

660 EAST JEFFERSON STREET

Address

TALLMAHESSEE FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

900001794809
-04/25/95--01073--016
*****70.00 *****70.00

American Elderserve Management

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
96 APR 25 PM 12:57

4/25

☒ Profit

☐ NonProfit

☐ Limited Liability Company

☒ Foreign

☐ Amendment

☐ Merger

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Reinstatement

☐ Annual Report

☐ Reservation

☐ Other

☐ Change of R.A.

☐ Certified Copy

☐ Photo Copies

☐ Fictitious name Filing

☐ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☒ Pick Up

☐ Mail Out

Name
Availability

Document
Examiner

Updater

Verifier

Acknowledgment

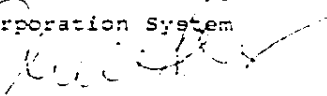
W.P. Verifier

4/25

PLEASE RETURN EXTRA COPIES
FILE STAMPED

**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

1. American Elderserve Management, Inc.
(Name of corporation must include the word "INCORPORATED", "COMPANY", "CORPORATION", or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Georgia
(State or country under the law of which it is incorporated)
3. Applied For
(FEI number, if applicable)
4. August 21, 1995
(Date of incorporation)
5. Perpetual
(Duration: Year corp. will cease to exist or "perpetual")
6. Upon Qualification
(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))
7. 3450 Duluth Park Lane, Duluth, Georgia 30136
(Current mailing address)
8. Manage retirement facilities and extended stay motels
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)
9. Name and street address of Florida registered agent:
Name: C T Corporation System
Office Address: c/o C T Corporation System, 1200 South Pine Island Road
Plantation, Florida, 33324
(Zip Code)
10. Registered agent 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 obligation of my position as registered agent
C T Corporation System

(Registered agent's signature) (Officer)
John Masters, Assistant Secretary
(Type Name and Title of Officer)

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 addresses of officers and/or directors:

A. DIRECTORS

Chairman: _____

Address: _____

Vice Chairman: _____

Address: _____

Director: Dave Winters _____

Address: 3450 Duluth Park Lane _____

Duluth, Georgia 30136 _____

Director: _____

Address: _____

B. OFFICERS

President: Dave Winters _____

Address: 3450 Duluth Park Lane _____

Duluth, Georgia 30136 _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

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Treasurer: _____

Address: _____

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

13. Dave Winters
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Dave Winters, President
(Typed or printed name and capacity of person signing application)

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Secretary of State
Business Information and Services
Suite 315, West Tower
2 Martin Luther King Dr. Dr.
Atlanta, Georgia 30334-1530

DOCKET NUMBER : 961130619
CONTROL NUMBER : 9525549
DATE INC/AUTH/FILED: 08/21/1995
JURISDICTION : GEORGIA
PRINT DATE : 04/22/1996
FORM NUMBER : 0211

CT CORPORATION SYSTEM
JEFFREY P. HARRISON
1201 PEACHTREE STREET, NE
ATLANTA, GA 30361

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CERTIFICATE OF EXISTENCE

I, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

AMERICAN ELDERSERVE MANAGEMENT, INC.
A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.



Lewis A. Massey
LEWIS A. MASSEY
SECRETARY OF STATE

F96 000002076

Plantation South

Vaguely Elegant Assisted Living Residence

1770 Indian Trail Road
Suite 400
Norcross, Georgia 30093

700002189727--0
-05/23/97--01046--016
*****35.00 *****35.00

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. _____
(Corporation Name) (Document #)
2. _____
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input checked="" type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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DIVISION OF CORPORATIONS
97 MAY 23 AM 10:33

MAY 30 1997

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL
OF AUTHORITY TO TRANSMCT BUSINESS OR CONDUCT AFFAIRS
IN FLORIDA

American ECDERSERV MANAGEMENT INC.
(Name of Corporation)

GEORGIA
(Incorporated Under Laws Of)

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CORPORATION DIVISION
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This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

1770 INDIAN TRAIL RD # 400
(Mailing Address)

NORCROSS, GA 30093
(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

[Signature] CEO
Signature Title

MICHAEL D. BURKS 3/31/97
Typed or printed name Date