

Document Number Only

CT CORPORATION SYSTEM

660 EAST JEFFERSON STREET

Requestor's Name
TALLAHASSEE, FL 32301

Address
222-1092

City State Zip Phone

CORPORATION(S) NAME

900002547649--1
-06/04/98--01056--009
*****70.00 *****70.00

American Lifestyles, Inc.

W98-12855

98 JUN 25 AM 9:08
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED 6/26

☒ Profit
☐ NonProfit
☐ Limited Liability Co.

☐ Amendment

☐ Merger

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Name Registration
☐ Fictitious Name

☐ Change of R.A.
☐ UCC

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name Availability
Document Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

JUN 04 1998

Thanks,
Jeff

RECEIVED
98 JUN -4 AM 11:57
DIVISION OF CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATION

RECEIVED

98 JUN 25 PM 4:11

June 4, 1998

CT CORPORATION SYSTEM
ATTN: JEFF

SUBJECT: AMERICAN LIFESTYLES, INC.
Ref. Number: W98000012855

d/b/a

AMERICAN LIFESTYLES OF TENNESSEE, INC.

We have received your document for AMERICAN LIFESTYLES, INC. and your check(s) totaling \$70.00. However, the document has not been filed and is being retained in this office for the following:

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6958.

Lee Rivers
Document Specialist

Letter Number: 698A00031620

WACK INW Pickup 6/25

RESOLUTION OF BOARD OF DIRECTORS

(Please print or type)

I, the undersigned Cindy S. Cross, do hereby certify
(Name)

that this Resolution of the Board of Directors of American Lifestyles, Inc.

(Corporate Name)

a corporation duly organized and existing under the laws of the State of Tennessee

was duly adopted on June 17

Be it resolved, that American Lifestyles, Inc.
(Corporate Name)

organized and existing in the State of Tennessee, hereby adopts the name

American Lifestyles of Tennessee, Inc. for use in Florida.

Dated: 6/17/98

American Lifestyles, Inc.

BY: Cindy S. Cross

Signature of either Chairman, Vice Chairman or any officer

Cindy S. Cross, Assistant Secretary

Type or print name

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TALLAHASSEE FLORIDA

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 Lifestyles, 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. Tennessee

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

3. 62-1340023

(FEI number, if applicable)

4. December 31, 1987

(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. 3570 Keith Street, N.W., Cleveland, Tennessee 37312

(Current mailing address)

8. The purpose of the Company is to manage retirement homes and assisted facilities.

(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

Mary R. Adams

(Registered agent's signature) (Officer)

MARY R. ADAMS, ASST. Secy.

(Type Name and Title of Officer)

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TALLAHASSEE FLORIDA
SECRETARY OF STATE

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: Forrest L. Preston

Address: 3570 Keith Street, N.W.

Cleveland, TN 37312

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE FLORIDA

B. OFFICERS

President: Forrest L. Preston

Address: 3570 Keith Street, N.W.

Cleveland, Tennessee 37312

Vice President: John P. O'Brien, Jr.

Address: 3570 Keith Street, N.W.

Cleveland, Tennessee 37312

Secretary: Angelena Y. Clayton

Address: 3570 Keith Street, N.W.

Cleveland, Tennessee 37312

Assistant

Secretary: Cindy S. Cross
3570 Keith Street, N.W.
Cleveland, TN 37312

Treasurer: _____

Address: _____

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

American Lifestyles, Inc.

13.

Cindy Cross

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

14.

CINDY CROSS, Secy.

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

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

Secretary of State
Corporations Section
James K. Polk Building, Suite 1800
Nashville, Tennessee 37243-0306

ISSUANCE DATE: 05/29/1998
REQUEST NUMBER: 98149025
TELEPHONE CONTACT: (615) 741-6488

CHARTER/QUALIFICATION DATE: 12/31/1987
STATUS: ACTIVE
CORPORATE EXPIRATION DATE: PERPETUAL
CONTROL NUMBER: 0198783
JURISDICTION: TENNESSEE

TO:
CAPITAL FILING SERVICE INC.
7051 HWY 70 SOUTH
NO 333
NASHVILLE, TN 37221

REQUESTED BY:
CAPITAL FILING SERVICE INC.
7051 HWY 70 SOUTH
NO 333
NASHVILLE, TN 37221

CERTIFICATE OF EXISTENCE

I, RILEY C DARNELL, SECRETARY OF STATE OF THE STATE OF TENNESSEE DO HEREBY CERTIFY THAT
"AMERICAN LIFESTYLES, INC."

IS A CORPORATION DULY INCORPORATED UNDER THE LAW OF THIS STATE WITH DATE OF
INCORPORATION AND DURATION AS GIVEN ABOVE;
THAT ALL FEES, TAXES, AND PENALTIES OWED TO THIS STATE WHICH AFFECT THE
EXISTENCE OF THE CORPORATION HAVE BEEN PAID;
THAT THE MOST RECENT CORPORATION ANNUAL REPORT REQUIRED HAS BEEN FILED
WITH THIS OFFICE; AND
THAT ARTICLES OF DISSOLUTION HAVE NOT BEEN FILED; AND
THAT ARTICLES OF TERMINATION OF CORPORATE EXISTENCE HAVE NOT BEEN FILED

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

FOR: REQUEST FOR CERTIFICATE

ON DATE: 05/29/98

FROM:
CAPITAL FILING SERVICE, INC.
7051 HWY 70 S
#333
NASHVILLE, TN 37221-0000

RECEIVED: FEES \$150.00 \$150.00
TOTAL PAYMENT RECEIVED: \$300.00

RECEIPT NUMBER: 00002319136
ACCOUNT NUMBER: 00101230



Riley C Darnell

RILEY C. DARNELL
SECRETARY OF STATE