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Florida Department of State
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**FLORIDA/FOREIGN LIMITED LIABILITY CO.
PALMS SENIOR ASSISTED LIVING FACILITY, LLC**

Certificate of Status	0
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EXAMINER

H09000258792 3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

PALMS SENIOR ASSISTED LIVING FACILITY, LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

90 BRANCH FARM ROAD
SARANAC LAKE, NEW YORK 12983

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

A1A REGISTERED AGENT INC.
5647 110TH AVENUE NORTH
ROYAL PALM BEACH, FLORIDA 33411

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Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Tina Maki TINA MAKI PRESIDENT

A1A REGISTERED AGENT INC. / Registered Agent's signature

H09000258792 3

H09000258792 3

PAGE 2 PALMS SENIOR ASSISTED LIVING FACILITY, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

FREDERICK R GATES

90 BRANCH FARM ROAD

SARANAC LAKE, NEW YORK 12983

MANAGING MEMBER

KELLY GATES

90 BRANCH FARM ROAD

SARANAC LAKE, NEW YORK 12983

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Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

FREDERICK R GATES

H09000258792 3