2013 LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 14, 2013
Secretary of State

DOCUMENT# L12000146713

Entity Name: OAKTREE ASSISTED LIVING FACILITY LLC

Current Principal Place of Business:

4804 OAKLAWN LANE
MADERIA BEACH, FL 33708 US

New Principal Place of Business:

4804 OAKLAWN LANE
MADEIRA BEACH, FL 33708 US

Current Mailing Address:

4804 OAKLAWN LANE
MADERIA BEACH, FL 33708 US

New Mailing Address:

4804 OAKLAWN LANE
MADEIRA BEACH, FL 33708 US

FEI Number: 46-1436165 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAK COURT
A
TAMPA, FL 33612 US

Name and Address of New Registered Agent:

KEEL, KIMBERLY A
4804 OAKLAWN LANE
MADEIRA BEACH, FL 33708 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: KIMBERLY A KEEL 11/14/2013
Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: KEEL, KIMBERLY A
Address: 4804 OAKLAWN LANE
City-St-Zip: MADEIRA BEACH, FL 33708 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: KIMBERLY A KEEL MGRM 11/14/2013
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date