Division of Corporations

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# Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

: (850) 922-4003 Fax Number

From:

: FORD, JETER & BOWLUS, P.A. Account Name

Account Number: 075350000442 : (904)268-7227 Phone

: (904) 262-3337

# LIMITED LIABILITY COMPANY

The Allegro at Timacuan, L.L.C.

Certificate of Status	1
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### ARTICLES OF ORGANIZATION FOR THE ALLEGRO AT TIMACUAN, L.L.C.

ARTICLE 1: NAME

The name of the Limited Liability Company is: THE ALLEGRO AT TIMACUAN, L.L.C.

**ARTICLE 2: ADDRESS** 

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

c/o Hallmark Senior Housing, Inc. 212 South Central Avenue, Suite 301 St. Louis, Missouri, 63105

**ARTICLE 3: DURATION** 

The period of duration for the Limited Liability Company shall be: perpetual.

#### **ARTICLE 4: MANAGEMENT**

The Limited Liability Company is to be managed by the members and the name and address of the Managing Member is:

> Attention: President Hallmark Senior Housing, Inc. 212 South Central Avenue, Suite 301 St. Louis, Missouri, 63105

> > **ARTICLE 5: RESERVED**

**ARTICLE 6: RESERVED** 

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This Instrument Prepared by: Theresa M. Kenney, Attorney-At-Law 10110 San Jose Blvd., Jacksonville, Ft. 32257 Phone: (904) 268-7227 FL Bar #970468

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#### **ARTICLE 7: REGISTERED AGENT**

The name and address of the registered agent for service of process required to be maintained by section 608.412, Florida Statutes, is:

Theresa Marie Kenney, Esq. Ford, Jeter, Bowlus & Duss, P.A. 10110 San Jose Boulevard Jacksonville, Florida 32257

IN WITNESS WHEREOF, authorized person, executed these Articles of Organization this 24th day of August, 1999.

David L. Kirkland Authorized Person

#### ACCEPTANCE BY REGISTERED AGENT

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.

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## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

### STATE OF FLORIDA COUNTY OF DUVAL

- I, DAVID L. KIRKLAND, as authorized person, having been duly authorized by the members of THE ALLEGRO AT TIMACUAN, L.L.C., the limited liability company formed hereby, depose and say:
- The above named Limited Liability Company has one member. 1.
- 2. The total amount of cash contributed by the members is: \$100.00
- There is no property anticipated to be contributed by the members. 3.
- The total amount of cash or property anticipated to be contributed by the members 4. is: \$100,00
- 5. Total amounts of items 2,3 and 4 above is: \$100.00

IN WITNESS WHEREOF, David I	Kirkland, a	as authori	zed person, e	executed	this Affidavit
this 24th day of August, 1999.		$\cap$			
			$\mathcal{P}$	<i>-</i> -	\

SWORN TO and subscribed before me this 24th day of August, 1999, by David L. Kirkland.

Notary Public, State and County of oresaid My Commission expires:

Commission No:

He: (please check appropriate statement) is personally known to me produced identification (apacify type):

THERESA MARIE KENNEY MY COMMISSION # CC 694362

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