## M00000001358 Document Number Only

CT Corporation System 660 East Jefferson Street Tallahassee, FL 32301 Tel 850 222 1092 Fax 850 222 7615 Attn: Jeff Netherton

W.P. Verifier

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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

GREYSTONE SPRINGS OF LADY LAKE, L.L.C.	
(Name of foreign limited liability company)	
2. DELAWARE (Jurisdiction under the law of which foreign limited liability company is organized)  3. 13-4118701 (FEI number, if applicable)	
4. MAY 9, 2000  (Date of Organization)  5. PERPETUAL  (Duration: Year limited liability companexist or "perpetual")	y will cease to
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.	.)
C/O GREYSTONE & COMPANY	
152 W. 57TH STREET, 60TH FLOOR, NEW YORK, NEW YORK 10019	
(Street address of principal office)	8 ≦∞
. If limited liability company is a manager-managed company, check here	SION OF
. The usual business addresses of the managing members or managers are as follows:	7 AM
RECTOR HOLDING CORP.	<b>69</b>
C/O GREYSTONE & COMPANY	TIONS
152 W. 57TH STREET, 60TH FLOOR	
NEW YORK, NEW YORK 10019	·
O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign anslation of the certificate under eath of the translator must be submitted.)	
l. Nature of business or purposes to be conducted or promoted in Florida:	
Nature of business or purposes to be conducted or promoted in Florida:  OPERATE NURSING HOME  OPERATE NURSING HOME	•
	•
	·
Signature of a member or an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes	

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name and the Flori	ida street address of the registered agent and office are:
C T Corpora	ation System
	· (Name)
c/o C T Corr	poration System, 1200 South Pine Island Road
	Florida street address (P.O. Box NOT ACCEPTABLE)

Having been named as registered agent and 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..

City/State/Zip

C Prorporation System

(Signature)

Jonathan R. Cidolings
Assistant Secretary

1. The name of the Limited Liability Company is:

Plantation

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

## State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "GREYSTONE SPRINGS OF LADY LAKE,

L.L.C." IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE

AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE

RECORDS OF THIS OFFICE SHOW, AS OF THE SIXTH DAY OF JULY, A.D.

AND I DO HEREBY FURTHER\_CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

Edward J. Freel, Secretary of State

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AUTHENTICATION:

0541637

DATE:

07-06-00