

MA400000437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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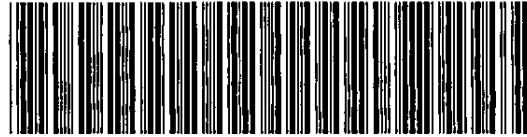
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Giffen DEC -5 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Welsh Senior Homes Development Company, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed Affidavit by Foreign Limited Liability Company to Change Manager(s) or Managing Member(s) and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ryan Featherstone, Esq.

Name of Person

Dunlap & Moran, P.A.

Firm/Company

22 S. Links Ave., Suite 300

Address

Sarasota, FL 34236

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ryan Featherstone at (941) 366-0115

Name of Person

Area Code and Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY
TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Welsh Senior Homes Development Company, LLC
2. This entity was formed under the laws of: Minnesota
3. This entity was authorized to transact business in Florida on 2/3/04
and its Florida document/registration number is M04000000437
4. The name and address of each manager or managing member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Dennis J. Doyle

4350 Baker Road, Suite 400

Minnetonka, MN 55343

Required Signature: _____

Signature of Manager, Managing Member or Member

Filing Fee: \$25

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TALLAHASSEE, FLORIDA