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Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 Phone : (850) 222-1092 Fax Number : (850) 222-9428 FOREIGN LIMITED LIABILITY COMPANY

GN Living, LLC

Certificate of Status	1
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

GN L: (Name of F	iving, LLC	lity Company)	·	_
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Missouri	 3	20~149,5349		
(Jurisdiction under the law of which foreign company is organized)	imited fraprity	(FEI number, if applicable)		H AUC
O8/09/04 (Date of Organization)	5	Perpetual	interest State of	Č
		(Duration: Year limited liability company vexist or "perpetual")	Will coase to	
(See sections 608.50	I & 608-502 F.S. to d	, if prior to registration.) etermine penalty liability)	LORIU	- ,
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Sr. Touis, MO 63121			· · · · · · ·	-
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Typed or printed name of signee

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 PLORIDA.

1. The name of the Limited Liability Company is:	D: ([‡] 10
GN Living, LLC	22.	Oh 410
2. The name and the Florida street address of the registered agent and office are:	ASSEC	20 AM
C T Corporation System (Name)	FLORIDE	8:59
1200 South Pine Island Road Florida Street Address (P.O. Box NOT ACCEPTABLE)	77 %	
Plantation FL 33324 City/State/Zip		

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, Florida Statutes.

(Signature)
L. Miles, Asst. Secretary

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)





Matt Blunt Secretary of State

CORPORATION DIVISION
CERTIFICATE OF GOOD STANDING

I, MATT BLUNT, Secretary of the State of Missouri, do hereby certify that the records in my office and in my care and custody reveal that

GN LIVING, LLC LC0603614

was created under the laws of this State on the 9th day of August, 2004, and is in good standing, having fully complied with all requirements of this office.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 9th day of August, 2004

Secretary of State

Certification Number: 6917062-1 Reference:

