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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Nam	ne)
(D	ocument Number)	
Certified Copies	·· Certificates	
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DEPAY OF STATE STA

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CRETARY OF SIA



ACCOUNT NO. : 072100000032

REFERENCE :

4816510

AUTHORIZATION :

7

COST LIMIT : \$ 160.00

ORDER DATE: November 27, 2006

ORDER TIME : 1:19 PM

ORDER NO. : 623743-020

CUSTOMER NO: 4816510

FOREIGN FILINGS

NAME: BREA EMERITUS LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan -- EXT# 2955

EXAMINER:

APPLICATION BY FOREIGN LIMITED LIA TRANSACT BUS	BILITY COMPANY FOR AUTHORIZATION TO SINESS IN FLORIDA
IN COMPLIANCE WITH SECTION 608:503, FLORIDA STATUT LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE	
1. Brea emeritus LLC	
(Name of Foreign Limited	Liability Company)
2. Delaware	3. 20-5630571
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
4. September 20, 2006	γ Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6. upon fialing	
6. upon flaing (Date first transacted business in F (See sections 608.501 & 608.502 F.S	orida, if prior to registration.)
3131 Elliott Avenue, Suite 500, Seattle, WA 98121	. a decimal penalty happing)
7.	
(Stroot Address	of Principal Office)
(Sueen Address	——————————————————————————————————————
8. If limited liability company is a manager-managed	company, check here
9. The name and usual business addresses of the mar	naging members or managers are as follows:
Emeritus Corporation, Administrative Member, 3131 Ellic	
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photocop translation of the certificate under cath of the translator must be sub	
11. Nature of business or purposes to be conducted of	or promoted in Florida: Acquire, operate, lease,
maintain, finance, sell and otherwise use assisted living faci	ility through wholly-owned subsidiary.
Almon med Ill	Sentition
	uthorized representative of a member.
	F.S., the execution of this document constitutes cjury that the facts stated herein are true.)
	er, by Raymond R. Brandstrom, Vice President, Finance
Typed or printe	d 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 FLORIDA.

1.	The name of the Limited Liability Company is:
	BREA Emeritus LLC
2.	The name and the Florida street address of the registered agent and office are:
	Corporation Service Company
	(Name)
	1201 Hays Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
	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.

By: (Signature)

Karen Harris, Asst. VP

\$ 100.00 Filing Fee for Application
 \$ 25.00 Designation of Registered Agent
 \$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "BREA EMERITUS LLC" 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 TWENTY-SEVENTH DAY OF NOVEMBER, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "BREA EMERITUS LLC" WAS FORMED ON THE TWENTIETH DAY OF SEPTEMBER, A.D. 2006.

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



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5222519

DATE: 11-27-06

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