# M0600000 6807

1
(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
,
· (Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Ocidinates of Olatus
Special Instructions to Filing Officer:
Operational to Filling Officer.
[ ] L M
1211
Office Use(Only )



500082284265

12/07/06--01010--010 \*\*130.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

CRETARY OF STATE

## GENTRY LOCKE RAKES & MOORE

A Limited Liability Partnership

December 6, 2006

10 Franklin Road, S.E.

Post Office Box 40013

Roanoke, Virginia 24022-0013

www.gentrylocke.com

Attorneys at Law

540-983-9300

Facsimile 540+983+9400

Direct Dial: (540) 983-9326

brittney\_hasenbeck@gentrylocke.com

By FedEx

Florida Department of State Division of Corporations Registration Section 2661 Executive Center Circle Tallahassee, FL 32301

Re: Gordon Oaks, AL Facility

### Dear Sir/Madam:

Enclosed is an Application for Authorization to Transact Business in Florida (with Covering and Certificate of Designation of Registered Agent) and Certificate of Fact from the Virginia State Corporation Commission for each of the following Limited Liability Companies:

- 1. Traditions Management of Alabama, LLC
- 2. Gordon Oaks Medical Rehab Center, LLC
- 3. Carrington Place of Gordon Oaks, LLC
- 4. Carrington Village of Gordon Oaks, LLC

Also enclosed, attached to each application, is a check in the amount of \$130.00, payable to the Florida Department of State, as payment of fees in this matter.

Thank you for your cooperation in this matter. Should you have any questions, please do not hesitate to contact us.

Sincerely,

GENTRY LOCKE RAKES & MOORE, LLP

uttrey Hasenbuck

Brittney A. Hasenbeck

Paralegal

**Enclosures** 

Cc: Benjamin Atkins (w/o encls.)

12626/25/2074087v1

ָ ֓֞֞֞֞֞֞֞֞֞֞֞֞֩֞֞֞֞֞֩֞֞֩֞֞֩

### **COVER LETTER**

	stration Section sion of Corporations				
SUBJECT:	Traditions Management of A	labama, LLC			
	(Name of Li	mited Liability Company)			
Florida," Cer	• • •	iability Company for Authorization to Transubmitted to register the above referenced in .			n
Please return	all correspondence concerning this	matter to the following:			
	Ben Atkins				
	1)	Name of Person)			
	Traditions Management		SECRE	06 DEC -7 AHII: 2:	
(Firm/Company)			HSS-	; -7	T
			ARY OF STATE SSEE. FLOPIDA	<b>&gt;</b>	HLED
	1022 Main Street, Suite H		-LOH -LOH -LST/	=	
		(Address)	DA A	27	
	Dunedin, FL 34698				
	(City/S	State and Zip Code)			
For further in	nformation concerning this matter, p	lease call:			
Ber	n Atkins	at ( 727 ) 224-9874	<del>-,</del>		
	(Name of Person)	(Area Code & Daytime Telephone N	Number)		
Divis P.O. I	LING ADDRESS: ion of Corporations Box 6327 hassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	check for the following amount: 5.00 Filing Fee   \$\times 130.00\$ Filing Fee &  Certificate		; Fee, Certif atus & Certi		эру

## 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:

1 Traditions Management of Alabama, LLC	
(Name of Foreign Limited Liability Company)	
2. Virginia  (Jurisdiction under the law of which foreign limited liability company is organized)  3. (FEI number, if applicable)	
4. 12/01/2006  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease exist or "perpetual")	to
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7 1022 Main Street, Suite H	
Dunedin, FL 34698  (Street Address of Principal Office)	SE DEC
8. If limited liability company is a manager-managed company, check here   9. The name and usual business addresses of the managing members or managers are as follows:  Benjamin Atkins - 1022 Main Street, Suite H, Dunedin, FL 34698 (Manager)	C-7 AMII:27
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language translation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida: Headquarters	·
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 an affirmation under the penalties of perjury that the facts stated herein are true.)	

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 FLORIDA.

1. The name of the Limited Liability Company is:		
Traditions Management of Alabama, LLC		-
2. The name and the Florida street address of the registered agent and office are:		
Benjamin Atkins	SECR	90 DE
(Name)	ETARY HASSEE	C -7
1022 Main Street, Suite H	교육	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	STATE	AH II: 27
Dunedin FL 34698		
City/State/Zip		
Having been named as registered agent and to accept service of process for the above stated liability company at the place designated in this certificate, I hereby accept the appointment agent and agree to act in this capacity. I further agree to comply with the provisions of all s relating to the proper and complete performance of my duties, and I am familiar with and accept service of my position as registered agent as provided for in Chapter 608, Florida Status (Signature)	as registe tatutes ccept the	ered

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00

Certificate of Status (optional)

# Commontrealth of Hirginia



# State Corporation Commission

I Certify the Following from the Records of the Commission:

A certificate of organization was issued by the Commission to Traditions Management of Alabama, LLC, a limited liability company formed under the laws of VIRGINIA, effective as of December 01, 2006.

As of the date below, articles of cancellation have not been filed in this office by Traditions Management of Alabama, LLC, a Virginia limited liability company.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: December 5, 2006

Joel H. Peck, Clerk of the Commission