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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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A Limited Liability Partnership

December 6, 2006

10 Franklin Road, S.E.

Post Office Box 40013

Roanoke, Virginia 24022-0013

www.gentrylocke.com

By FedEx

Attorneys at Law

Facsimite 540+983+9400 Direct Dial: (540) 983-9326

540.983.9300

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

brittney_hasenbeck@gentrylocke.com

Re: Muscatine, Iowa Facility

Dear Sir/Madam:

Enclosed is an Application for Authorization to Transact Business in Florida (with Cover letter 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. Muscatine HCP Partners, LLC

2. Carrington Place of Muscatine, LLC

3. Carrington Place Village of Muscatine, 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

uttney Hasenbuck

Brittney A. Hasenbeck

Paralegal

Enclosures

Cc: Benjamin Atkins (w/o encls.)

12626/6/2074083v1

COVER LETTER

_	ion of Corporations			
SUBJECT:	Muscatine HCP Partners, I	LLC		
	(Name of l	Limited Liability Company)		
Florida," Cer		Liability Company for Authorization to Transacter submitted to register the above referenced foreign.		
Please return	all correspondence concerning th	is matter to the following:		
	Ben Atkins			
		(Name of Person)	DEC -	71
	Traditions Management	 m 	7 A	
		(Firm/Company)	06 DEC -7 AM II: 33 Secreivry of State	O
	1022 Main Street, Suite H		- -	
		(Address)		
	Dunedin, FL 34698		_	
	(Cit	y/State and Zip Code)		
For further in	nformation concerning this matter,	please call:		
Ber	n Atkins	at (727)224-9874		
	(Name of Person)	(Area Code & Daytime Telephone Num	ber)	
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 \$\square\$\$\$\$\$130.00 Filing Fe		Certificate & Certified	

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.	Muscatine HCP Partners, LLC	
•	(Name of Foreign Limited Liability Company)	
	Virginia (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)	
4.	10/17/2006 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
6. 7.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 1022 Main Street, Suite H	. 330 90
, •	Dunedin, FL 34698 (Street Address of Principal Office)	-7 AM
8.	If limited liability company is a manager-managed company, check here X	111:33
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)	
the	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receptablication under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a instation of the certificate under oath of the translator must be submitted.)	ords in
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.) Benjamin Atkins	•

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:	
Muscatine HCP Partners, LLC	
2. The name and the Florida street address of the registered agent and office are:	06 DEC SECRE
Benjamin Atkins	OFFI - P
(Name)	
1022 Main Street, Suite H	AH II OF ST FLOO
Florida Street Address (P.O. Box NOT ACCEPTABLE)	II: 34 STATE ORIDA
Dunedin FL 34698 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)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 500	Certificate of Status (ontional)

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State Corporation Commission

I Certify the Following from the Records of the Commission:

A certificate of organization was issued by the Commission to Muscatine HCP Partners, LLC, a limited liability company formed under the laws of VIRGINIA, effective as of October 17, 2006.

As of the date below, articles of cancellation have not been filed in this office by Muscatine HCP Partners, LLC, a Virginia limited liability company.

Nothing more is hereby certified.



Signed and Sealed at Richmond on this Date: November 6, 2006

Joel H. Peck, Clerk of the Commission