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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only

Overpaid \$25.00



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N. CAUSSEAUX

APR 30 2008

EXAMINER

COVER LETTER

| 10: | Division of Corporations | |
|---------|---|--|
| SUBJI | BJECT: Senior Resource Group, LLC | |
| | (Name of Limited Liab | oility Company) |
| Florida | enclosed "Application by Foreign Limited Liability Coida," Certificate of Existence, and check are submitted lity company to transact business in Florida | |
| Please | se return all correspondence concerning this matter to | he following: |
| | Tawnya R. Wojciechowski, Esquire | |
| | (Name of Po | erson) |
| | TRW Law Group | |
| | (Firm/Comp | any) |
| | 19900 MacArthur Boulevard, Suite | ÷ 1150 |
| | (Addres | s) |
| | Irvine, California 92612-8433 | |
| | (City/State and 2 | Cip Code) |
| For fur | further information concerning this matter, please call: | |
| | Tawnya R. Wojciechowski, Esquire at (| 949 ₎ 701-4747 |
| | | ea Code & Daytime Telephone Number) |
| | MAILING ADDRESS: STRE | ET ADDRESS: |
| | | on of Corporations |
| | | Building Executive Center Circle |
| | | assee, FL 32301 |
| | osed is a check for the following amount: □\$125.00 Filing Fee □\$130.00 Filing Fee & □\$15. Certificate of Status | 5.00 Filing Fee & S160.00 Filing Fee, Certificate Certified Copy of Status & Certified Cop |

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 | of the Limited Liability Company is: | | | |
|----------------|--|-------|---|--|
| Senior Reso | source Group, LLC | | _ | |
| 2. The name ar | and the Florida street address of the registered agent and office are: | | | |
| | CT Corporation | | | |
| | (Name) | g 8 | | |
| | 1200 South Pine Island Road | | | |
| | 는 29 | E | | |
| | Plantation FL_33324 | OF SI | O | |
| | 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.

M.T. FITZPATRICK
ASSISTANT SECRETARY
(Signature)

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

Pa

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:

| (Name of Fore | eign Limited Lia | ibility Company) | ····· |
|---|---|--|---|
| Polowaro | _ | • | |
| Delaware Jurisdiction under the law of which foreign lim | 3, | (FEI number, if a | -nlicable) |
| company is organized) | ned natinity | (remunicei, ii a | ррпсавіе) |
| 05/09/2000 | _ | Perpetual | |
| (Date of Organization) | 5. | (Duration: Year limited liability | company will cease to |
| . (Bute of Organization) | | exist or "perpetual") | y company will cease to |
| | | | |
| (Date first transacted l | business in Flor | da, if prior to registration.) | -10 O |
| (See sections 608.501 & | 2 608,502 F.S. t | o determine penalty liability) | |
| 500 Stevens Boulevard, Suite 100 | | | ER 5 . |
| | | | 11 R |
| Solana Beach, California 92075 | | | SE 33 |
| (S | treet Address of | Principal Office) | |
| | | | AN II: |
| If limited liability company is a manage | er-managed c | ompany, check here 🔀 | 원크 T. |
| | | | 을 21 |
| The name and usual business addresses | of the manag | ging members or managers a | re as follows: |
| | | | |
| | • | , | |
| _ | • | • | A Sonace |
| _ | • | • | A Separate |
| _ | • | • | A Separate |
| SAG PARTNERS MAN, | • | • | A SEPARAT |
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| _ | ab emen Zaware | SERIES LIMIT | A SEPARAT |
| SERIES OF A DE | agemen Zaware Partwe | SERIES LIMIT | |
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Typed or printed name of signee

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SENIOR RESOURCE GROUP, 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 FIFTEENTH DAY OF APRIL, A.D. 2008.

08 APR 29 AH II: 27
SECRETARY OF STATE
ALL AHASSEE, FLORIDA

3225289 8300

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A CONTRACTOR OF THE PARTY OF TH

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6526525

DATE: 04-15-08

You may verify this certificate online at corp.delaware.gov/authver.shtml