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TALLAHASSEE, FLORIDA

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SEP 01 2010

EXAMINER

S. HAWKES

AUG 18 2010

EXAMINER

W10A 38997



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 18, 2010

LAURA D GOICU  
2315 WILLIAMS STREET  
BELLINGHAM, WA 98225

SUBJECT: MORNINGSTAR SENIOR LIVING, LLC  
Ref. Number: W10000038997

We have received your document for MORNINGSTAR SENIOR LIVING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Suzanne Hawkes  
Regulatory Specialist II

Letter Number: 510A00019886

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Morningstar Senior Living, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Laura D. Goicu  
Name of Person

Morningstar Senior Living, LLC  
Firm/Company

2315 Williams Street  
Address

Bellingham, Wa 98225  
City/State and Zip Code

morningstarseniorliving@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Laura D. Goicu at ( 360 ) 920-9598  
Name of Person Area Code & Daytime Telephone Number

**MAILING ADDRESS:**

Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**

Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. Morningstar Senior Living, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Morningstar Assisted Living, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Washington State, USA 3. 14-1979032  
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 07/28/2010 5. perpetual  
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A  
(Date first transacted business in Florida, if prior to registration.)  
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 2315 Williams Street, Bellingham, Wa 98225  
(Street Address of Principal Office)

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:

Laura D. Goicu 2315 Williams Street, Bellingham, Wa 98225

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a 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: \_\_\_\_\_

assisted living services

Laura Goicu  
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.)

Laura D. Goicu  
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:

Morningstar Senior Living, LLC

If unavailable, the alternate to be used in the state of Florida is:

Morningstar Assisted Living, LLC

2. The name and the Florida street address of the registered agent and office are:

Laura D. Goicu

(Name)

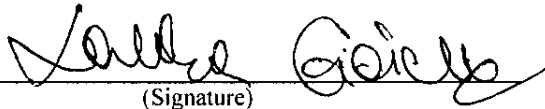
7600 78th Ave. N

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

Pinellas Park, FL 33781,

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)
\$ 5.00	Certificate of Status (optional)

FILED  
10 AUG 31 PM 12:14  
CLERK OF STATE  
TALLAHASSEE FLORIDA

UNITED STATES OF AMERICA

# The State of Washington



## Secretary of State

I, SAM REED, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

### CERTIFICATE OF EXISTENCE/AUTHORIZATION

OF

MORNINGSTAR SENIOR LIVING, LLC

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AUG 31 PM 12:14  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

I FURTHER CERTIFY that the records on file in this office show that the above named Limited Liability Company was formed under the laws of the State of WA and was issued a Certificate Of Formation in Washington on 7/28/2006.

I FURTHER CERTIFY that as of the date of this certificate, MORNINGSTAR SENIOR LIVING, LLC remains active and has complied with the filing requirements of this office.

Date: August 6, 2010

UBI: 602-636-888



Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Sam Reed, Secretary of State

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE  
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing

Members of Morningstar Senior Living, LLC  
(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

Washington  
(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the  
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the  
following name to transact business in the state of Florida:

Morningstar Assisted Living, LLC  
(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability  
Company, L.L.C., or LLC.)

Date: 08/24/2010

Signature(s) of Manager(s) and/or Managing Member(s):

*Laure Galt*  
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