Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Foreign Limited Liability Company Crooked River Road, L.L.C.

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Corporate Filing Menu

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T. HAMPTON

MAR 1 4 2011

EXAMINER

3/11/2011

COVER LETTER

Registration Section Division of Corporations

ro:

٠.		Name of Limited Liability	Company		
he enclosed ' xistence, and	'Application by Foreign Limite check are submitted to registe	d Liability Company for Auth r the above referenced foreign	orization to Transact limited liability com	Business in Florida	i," Certificate of iness in Florida
lease return a	all correspondence concerning t	his matter to the following:			
	BETSY SCHAACK			: .	•
		Name of Person	•, •	······································	.•
	AVIV REIT, INC.				
		Firm/Company	·		
	303 WEST MADISON STR	EET, SUITE 2400			
		Address			
	CHICAGO, IL 60606		٠.		
		City/State and Zip Co	de		•
	ANNUAL REPORT NOTIFI	CATION TO SUZANNE SCI	HILL: sachill@avivn	ait.com .	
	E-mail addr	ess; (to be used for future ann	ual report notification)	en e
r further info	rmation concerning this matter	, please call:	· . · ·		
BETSY	/ SCHAACK	at (312	855-0930		
	Name of Person	Area Code & Dayti	me Telephone Numb	er	
Divisio Registr P.O. Be	ING ADDRESS: on of Corporations ration Section ox 6327 assee, FL 32314	STREET ADDRESS: Division of Corporatio Registration Section Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns Circle		
closed is a	check for the following at 5 Filing Fee \$\int_{\text{Certificate o}} \frac{\$130.00 \text{ Filing}}{\text{Certificate o}} \tag{2.5}	ng Fee & SISS.00 Filing		Filing Pee, Certifica & Certified Copy	ıle .

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

	PLIANCE WITH SECTION 608 LIABILITY COMPANY TO TRAI	· · ·	-		TED TO REGISTE	R A FORE
CROC	KED RIVER ROAD, L.L.C.		•		4	
<u>(N</u>	ame of Foreign Limited Liabil	ity Company, must inclu	ide "Limited Liab	lity Company," "	L.L.C.," or "LLC.	<u>") </u>
consent of	inavailable, enter alternate name f the managers or managing in ""L.L.C," "LLC.")					
DELA	WARE	3	27-5081057			
(Jurisdi compun	ction under the law of which f y is organized)	oreign limited liability	, (FEI number, if ap	plicable)	,
. Februs	ıry 21, 2 011	5	perpetual			
	(Date of Organization)		(Duration: Yourself or "perp	ar limited liability etual")	company will cea	
5.	. ••					<u> </u>
•	(Date first to (See sections	ansacted business in Flo 608.501 & 608.502 F,S.	rida, if prior to re to determine pen	gistration.) alty liability)		11 HAR
303 W	est madison street, su	JITE 2400			•	_=
CHICA	GO, IL 60606				•	
	•	(Street Address o	of Principal Office	;)		တ္တ
	ted liability company is a ame and usual business a		- :	. —	e as follows:	
AVIV	FINANCING I, L.L.C., Sole I	Aember	: .		,	
303 W	EST MADISON STREET, S	JITE 2400		·.		
CHICA	GO, IL 60606				· · · · · · · · · · · · · · · · · · ·	
e jurisdicti anslation (d is an original certificate of exicon under the law of which it is of the certificate under oath of the	organized. (A photocopy e translator must be submi	is not acceptable.	If the certificate is i		
•	e of business or purpose		_			
To enga	ge in any lawful business for v	vhich an LLC may be or	ganized in this Su	ire,		` '
			·	· .		
	_	a member or an auth				
	(In accordance with section of penalties of perjury that the document to the Departm	facts stated herein are true.	I am aware that a	any false informat	ion submitted in a	i.)
		COVITZ, Authorized Re		The season of th	,	••
	·	Typed or printed r	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	e of the Limited Liability Company is:		
CROOKED R	IVER ROAD, L.L.C.	·	
lf unavailabl	e, the alternate to be used in the state of Florida is	:	
2. The name	and the Florida street address of the registered ag	ent and office are:	
,	C T Corporation System	. •	
•	(Name)		
	1200 South Pine Island Road		
•	Florida Street Address (P.O. Box NOT A	CCEPTABLE)	-
•	Plantation FL 33324		
	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: James M. Halpin
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)

11 MAR | AM 8: 04

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO EEREBY CERTIFY "CROOKED RIVER ROAD, L.L.C." 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 TENTH DAY OF MARCH, A.D. 2011.

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

4942338 8300

110285965

TION: 8615825

DATE: 03-10-11