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T. CLINE

AUG 29 2011

**EXAMINER** 

### **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT: VTR Heritage LF, LLC  Name of Limited Liability Company		
reame of Limited Liability Company		
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, Existence, and check are submitted to register the above referenced foreign limited liability company to transact business."		
Please return all correspondence concerning this matter to the following:		
Sandra Chamberlain		
Name of Person		
Ventas, Inc.		
Firm/Company		
10350 Ormsby Park Place, Suite 300		
Address .		
Louisville, KY 40223	e de	
City/State and Zip Code	H AUG	٠.
schamberlain@ventasreit.com	6 26	i4 4 . \$ - 3 ₹
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:		1 1
For further information concerning this matter, please call:		
Sandra Chamberlain at (502 ) 357-9382	er:	
Name of Person Area Code & Daytime Telephone Number		
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301		
Enclosed is a check for the following amount:  \$\sigma \text{\$\text{\$\text{\$\text{\$\text{\$\text{Filing Fee}}}}} \$\text{\$\t	.te	

#### 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	VTR Heritage LF, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
con	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written usent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability mpany," "L.L.C," "LLC.")
	Delaware  Jurisdiction under the law of which foreign limited liability company is organized)  3. 45-2877095  (FEI number, if applicable)
4.	7/29/2011  (Date of Organization)  5. perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6.	(Date first transacted business in Florida, if prior to registration.)
7.	(See sections 608.501 & 608.502 F.S. to determine penalty liability)  10350 Ormsby Park Place, Suite 300, Louisville, KY 40223
	(Street Address of Principal Office)
	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:
	10350 Ormsby Park Place, Suite 300, Louisville, KY 40223
the tran	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under cath of the translator must be submitted.)  Nature of business or purposes to be conducted or promoted in Florida: Real Estate Ownership
-	to plosol
	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

# 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 Comp	pany is:	
VTR Herita	ige LF, LLC		
If unavailable, th	ne alternate to be used in th	ne state of Florida is:	
2. The name and	l the Florida street address	of the registered agent and office are:	
(	T Corporation System	n	
•		(Name)	
		مرابع عالية ويترب ي	675
1200 South Pine Island Road			<u></u>
_	Florida Street Add	tress (P.O. Box NOT ACCEPTABLE)	
		٠ تاريخ	26
	Plantation	FI. 33324	
-		City/State/Zip	
		25- 25-	• •
Having heen name	od as readstored apent and t	to accept service of process for the above stated limited	======================================
		o accept service of process for the above stated aimted his certificate, I hereby accept the appointment as registere	
agent and agree to	act in this capacity. I furth	her agree to comply with the provisions of all statutes	14
relating to the pro	per and complete performa	nce of my duties, and I am familiar with and accept the	
obligations of my	position as registered agent	t as provided for in Chapter 608, Florida Statutes.	
	Variable	Katie Szramek Assistant Secretary	
	. (Signa	ature)	
	\$ 100.00	Filing Fee for Application	
	\$ 25.00	Designation of Registered Agent	
	\$ 30.00	Certified Copy (optional)	

5.00 Certificate of Status (optional)

# Delaware

PAGE 1

## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "VTR HERITAGE LF, 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 TWENTY-THIRD DAY OF AUGUST, A.D. 2011.

5018184 8300

110944956

AUTHE

Jeffrey W. Bullock, Secretary of State AUTHENTYCATION: 8987537

DATE: 08-23-11

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