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(Requestor's Name	e)	
(Address)		
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(City/State/Zip/Pho	one #)	
PICK-UP WAIT	MAIL	
(Business Entity N	lame)	
(Document Number)		
Certified Copies Certificat	tes of Status	
Special Instructions to Filing Officer:		
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OCT 25 2011

EXAMINER



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DIVISION OF CORPORATIONS

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RATION	SERVICE	COMPANY'	

ACCOUNT NO. : I2000000195

REFERENCE

955867

4305026

AUTHORIZATION (

COST LIMIT

ORDER DATE: October 24, 2011

ORDER TIME : 3:14 PM

ORDER NO. : 955867-005

CUSTOMER NO: 4305026

FOREIGN FILINGS

NAME: SNH BRFL PROPERTIES LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY ___ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

COVER LETTER

IECT:		Name of Limited Liability Company	
nclosed enc c, an	"Application by Foreign Limited I d check are submitted to register th	iability Company for Authorization to Transact Business in Florida e above referenced foreign limited liability company to transact bus	a," Certifica siness in Fl
ereturn	all correspondence concerning this	matter to the following:	
	Jessica M. Minnaert	•	
		Name of Person	
	Sullivan & Worcester LL	P	
		Firm/Company	•
	One Post Office Square		
		Address	
	Boston, MA 02109		
		City/State and Zip Code	
	jminnaert@sandw.com		
	E-mail addres	s: (to be used for future annual report notification)	- ,
rther in	formation concerning this matter, p	please call:	
Jess	ica M. Minnaert	at (617) 338-2822	
	Name of Person	Area Code & Daytime Telephone Number	_
Divi	ILING ADDRESS: sion of Corporations	STREET ADDRESS: Division of Corporations	
P.O.	stration Section Box 6327 hassee, FL 32314	Registration Section Clifton Building 2661 Executive Center Circle	•
		Tallahassee, FL 32301	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION 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.	SNH BRFL Properties LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
co	Fname unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writtensent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "LL.C," "LLC.")
2.	Delaware 3
,	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	8/16/2011 5 Perpetual
•	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	Two Newton Place, 255 Washington Street, Suite 300, Newton, MA 02458
	(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:
	Adam D. Portnoy, Two Newton Place, 255 Washington Street, Suite 300, Newton, MA 02458
	Barry M. Portnoy, Two Newton Place, 255 Washington Street, Suite 300, Newton, MA 02458
he	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in juristliction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a relation of the certificate under oath of the translator must be submitted.)
1	. Nature of business or purposes to be conducted or promoted in Florida: to acquire, own, operate, lease,
	improve, renovate and manage real property and the improvements thereon.
	Richard Single
	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
٠	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.)

Richard A. Doyle, Treasurer and Chief Financial Officer

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.

The name of the Limited Liability Company is:

Corporation Service Company

If unavailable, the alternate to be used in the state of Florida is:			
2. The name and the Flor	da street address of the registered agent and office are:		
Corporati	on Service Company		
	(Name)		
1201 Hay	s Street		
	Florida Street Address (P.O. Box NOT ACCEPTABLE)		
Tallahas	ee FL 32301		
· · · · · · · · · · · · · · · · · · ·	City/State/Zip		
liability company at the pla agent and agree to act in t relating to the proper and	istered agent and to accept service of process for the above stated limited ace designated in this certificate, I hereby accept the appointment as registed is capacity. I further agree to comply with the provisions of all statutes complete performance of my duties, and I am familiar with and accept the as registered agent as provided for in Chapter 608, Florida Statutes.		

\$ 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 "SNH BRFL PROPERTIES 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-FOURTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SNH BRFL
PROPERTIES LLC" WAS FORMED ON THE SIXTEENTH DAY OF AUGUST, A.D.
2011.

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

5023357 8300

111129674

AUTHENT CATION: 9111529

DATE: 10-24-11

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