M12000001007

(Requestor's Name)				
(Address)				
(Ad	ldress)			
- (Cit	ty/State/Zip/Phone	· #)		
(OII				
PICK-UP	☐ WAIT	MAIL		
/Ri	ısiness Entity Nan	ne)		
(DO	isiness Linky Ivan	iej		
(Do	ocument Number)	· ·		
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



400216549484

12 FEB 22 AM 10: 40

12 FEB 22 AM 9: 43

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

FEB 2 3 2012 T. HAMPTON



A CONTRACT OF THE STATE OF THE

COVER LETTER

TO:		ation Section n of Corpora				
SUBJE	ECT: En	core Senio	or Living, LLC			
			Nar	me of Limited Liability Compa	ıny	
					on to Transact Business in Florida d liability company to transact bus	
Please i	return all	corresponde	nce concerning this ma	atter to the following:		
		Bruce Sch	noen			•
				Name of Person		,
		Encore Se	enior Living, LLC			
				Firm/Company		
		6400 SE I	Lake Road, Suite 40	00	•	
	Address					
		Milwauke	e, OR 97222			
				City/State and Zip Code		
		bruce.sch	oen@encoresl.com			
	-		E-mail address: (t	o be used for future annual rep	ort notification)	•
For furt	her infort	nation conce	ming this matter, pleas	se call:		
	Bruce S	Schoen	· .	at (503)	905-3300	
		Na	me of Person	Area Code & Daytime Te	lephone Number	
	Division Registra P.O. Box	NG ADDRE to of Corporat tion Section x 6327 see, FL 3231	ions	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	•	
		check for th Filing Fee	ne following amount \$\int_\$130.00 Filing Feat Certificate of State	e &\$155.00 Filing Fee &	\$160.00 Filing Fee, Certification of Status & Certified Copy	ate

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. Encore Senior Living, LLC		,
(Name of Foreign Limited Liability Company; must incl	ude "Limited Liability Company," "L.L.C.," or "LLC.")	
	·	
(If name unavailable, enter alternate name adopted for the purpo	ose of transacting business in Florida and attach a copy of the	written
consent of the managers or managing members adopting the alto	ernate name. The alternate name must include "Limited Liabil	ity
Company," "L.L.C," "LLC.")		
	3. 93-1226943	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	
4. October 17, 1996	5 Perpetual	
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")	
6. January 1, 2012		
(Date first transacted business in FI (See sections 608.501 & 608.502 F.S	orida, if prior to registration.) Let to determine penalty liability)	•
- 6400 SE Lake Bond Swite 400	12	<u></u>
7. 6400 SE Lake Road, Suite 400	——————————————————————————————————————	<u> </u>
Milwaukee, OR 97222	EB 2	°₩ 2₹7:
·	of Principal Office)	
	company check here	F9
If limited liability company is a manager-managed	I company, check here	물ડ
O The ware of the man		
The name and usual business addresses of the man	aging members or managers are as follows:) (5)
Encore SM, LLC		
6400 SE Lake Road, Suite 400		
N. 1 O. 07000		
Milwaukee, OR 97222	<u> </u>	
10. Attached is an original certificate of existence, no more than 90	days old duly authenticated by the official having custody of reco	ords in
the jurisdiction under the law of which it is organized. (A photocop		
translation of the certificate under oath of the translator must be sub-		
	Manage assisted/	
11. Nature of business or purposes to be conducted or	r promoted in Florida:	
independent living facilities.	<u> </u>	
J. Maril	Mark	
	thorized representative of a member.	
	eution of this document constitutes an affirmation under the ue. I am aware that any false information submitted in a	
document to the Department of State constitutes	s a third degree felony as provided for in s.817.155, F.S.)	

Peter S. Muhlbach, managing member of Encore SM, LLC

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 Co	ompany is:
Encore Senior Living, LLC	· · · · · · · · · · · · · · · · · · ·
If unavailable, the alternate to be used in	the state of Florida is:
2. The name and the Florida street addre	ess of the registered agent and office are:
Corporation Service Cor	npany
	(Name)
1201 Hays Street	
Florida Street	Address (P.O. Box NOT ACCEPTABLE)
Tallahassee	FL 32301
	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.

Corporation Service Company

By:

(Signature)

Troy Todd
as its agent

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

19 EER 22 M 9: 43

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ENCORE SENIOR LIVING, 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 SIXTH DAY OF FEBRUARY, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ENCORE SENIOR LIVING, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF OCTOBER, A.D. 1996.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

2675084 8300

120127746

AUTHENTYCATION: 9345446

DATE: 02-06-12

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