Florida Department of State Division of Corporations

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gcbruce@martinpringle.com Email Address:

Foreign Limited Liability Company CENTER ALF, LLC

Certificate of Status	n the state the test shear of their
Certified Copy	1
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JUN - 8 2012

EXAMINER

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

IN COMPLIANCE WITH SECTION 608503, PLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

LIMI	TED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	CAGAGA
1	CENTER ALF, LLC. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	.
	(Table of Foreign annied Stating Company, mass models and analysis company, 1950.)	
conse	ome unavailable, enter afternate name adopted for the purpose of transacting business in Florida and attach a copy of the cut of the transgers or managing members adopting the alternate name. The alternate name must include "Limited Liabi pany," "L.L.C," "LLC.")	written lity
	45.5050510	
(Ju ca	Kansas 7. 45-5233518 Institution under the law of which foreign limited liability (FEI number, if applicable) (FEI number, if applicable)	-
4.	May 4, 2012 5. Perpetual	
_	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6	Upon qualification	_
	Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	201
7	8415 E. 21st St. N. #100, Wichita, KS 67206	~
		Sin 3€
_	(Street Address of Principal Office)	1
ý 14	Illmited liability company is a manager-managed company, check here	7
J. 11	Thinked habitity company is a manager-managed company, check here 23	7
9. T	المستهلولة في المستحد	(
		ပ္သ
_	8415 E, 21st St, N, # 100	-
_	Wichita, KS 67206	_
he ju ransk	attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of recrisicion under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a ation of the certificate under oath of the translator must be submitted.) Nature of business or purposes to be conducted or promoted in Florida: Real Estate	cords in
•	Signature of a member or an authorized representative of a member. (In accordance with section 601.408(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.) George C. Bruce	e.

Typed or printed name of signee

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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:		
CENTER ALF, LLC	~~~~~~~	
If unavailable, the alternate to be used in the state of Florida is:		
2. The name and the Florida street address of the registered agent and office are:	2012 SEC	
Cross Street Corporate Services, LLC (Name)	CRETARY AHASSI	4.4.2 6
200 S. Orange Avenue Florida Street Address (P.O. BOX NOT ACCEPTABLE)	RY OF	Same and the same
Sarasota, FI, 34236	STATE CORIDI	B _{randra}
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)

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STATE OF KANSAS OFFICE OF SECRETARY OF STATE KRIS W. KOBACH

I, KRIS W. KOBACH, Secretary of State of the state of Kansas, do hereby certify, that according to the records of this office.

Business Entity ID Number: 6646749

Entity Name: CENTER ALF, LLC

Entity Type: KANSAS LTD LIABILITY COMPANY

State of Organization: KS

Resident Agent: GEORGE C BRUCE

Registered Office: 100 N Broadway Suite 500, WICHITA, KS 67202

was filed in this office on May 04, 2012, and is in good standing, having fully complied with all requirements of this office.

No information is available from this office regarding the financial condition, business activity or practices of this entity.

In testimony whereof I execute this certificate and affix the seal of the Secretary of State of the state of Kansas on this day of June 07, 2012

KRIS W. KOBACH SECRETARY OF STATE

Certificate ID: 500025 - To verify the validity of this certificate please visit https://www.kansas.gov/bess/flow/validate and enter the certificate ID number.