

M/2000003872

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

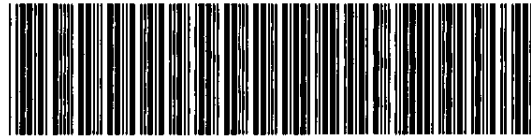
Special Instructions to Filing Officer:

A.W. LONT 9720

JUL 10 2011

EXAMINER

Office Use Only



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04/06/12--01022--014 **250.00

FILED
2012 JUL -6 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Signature HealthCARE, LLC
12201 Bluegrass Parkway
Louisville, KY 40299
Phone: 502.568.7119 Fax: 502.568.7160
bgatewood@signaturehealthcarellc.com

April 5, 2012

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

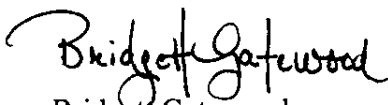
RE: Application by Foreign LLC to Transact Business in Florida

To Whom It May Concern:

Please find enclosed with this letter, two completed applications by Silver Angels, LLC and Silver Angels of Florida, LLC for Authorization to Transact Business in Florida, as well as a check in the amount of \$250.00, representing the filing fees.

Upon your receipt and issuance of said Application, kindly return the receipt of filing, to my attention at the above specified address. Should you have any questions, do not hesitate to contact me at (502) 568-7860.

Regards,


Bridgett Gatewood
Paralegal-Corp. /Transactions

Enclosures



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2012

BRIDGETT GATEWOOD PARALEGAL
12201 BLUEGRASS PARKWAY
LOUISVILLE, KY 40299

SUBJECT: SILVER ANGELS, LLC
Ref. Number: W12000019720

We have received your document for SILVER ANGELS, LLC and your check(s) totaling \$250.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a foreign limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations. Therefore, the limited liability company must select an alternate name for use in the state of Florida. Also, please note that adding "of Florida" or "Florida" to the end of the name is not acceptable.

Please insert the alternate name in the space provided on the application form. You must also attach a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

The alternate name must end with the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The word "Limited" may be abbreviated as "Ltd." and the word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC".

You must submit a copy of the written consent of the managers or managing members adopting the alternate name for Florida. For your convenience, we are enclosing a fill-in-the-blank form for you to complete and return to our office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Regulatory Specialist II

Letter Number: 912A00011338



Signature HealthCARE, LLC
12201 Bluegrass Parkway
Louisville, KY 40299
Phone: 502.568.7119 Fax: 502.568.7160
bgatewood@signaturehealthcarellc.com

July 5, 2012

Florida Department of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Application for Certificate of Authority
Silver Angels, LLC
Reference Number: W12000019720

To Whom It May Concern:

In response to your letter dated April 9, 2012, I have enclosed a corrected Application by Silver Angels, LLC for Authorization to Transact Business in Florida. Since the name Silver Angels, LLC is not available in the state of Florida, the entity has chosen to use SILVER ANGELS HOME CARE, LLC as an alternate name. Please proceed with the filing.

Thank you in advance for your attention to this matter. Should you have any questions, do not hesitate to contact me at (502) 568-7860.

Regards,


Bridgett Gatewood
Paralegal-Corp. /Transactions

Enclosures

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JUL -6 PM 2:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**WRITTEN CONSENT TO ADOPT ALTERNATE NAME FOR USE IN THE
STATE OF FLORIDA**

We, the undersigned, do hereby certify that we are the Managers and/or Managing

Members of Silver Angels, LLC

(Name of Limited Liability Company)

a limited liability company duly organized and existing under the laws of

Delaware

(State or Country of Organization)

Because the name of this foreign limited liability company does not satisfy the
requirements of the s. 608.406, F.S., the limited liability company hereby adopts the

following name to transact business in the state of Florida:

Silver Angels Home Care, LLC

(Name to be used by limited liability company in Florida. NOTE: Name must end with Limited Liability
Company, L.L.C., or L.L.C.)

Date: July 5, 2012

Signature(s) of Manager(s) and/or Managing Member(s):

[Signature] / Jacob Winter, Secretary of LPMH, Inc., Manager of
LP Manager, LLC, its Manager

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 JUL -6 PM 3:49

FILED

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Silver Angels, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

Silver Angels Home Care, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 35-2438329

(FEI number, if applicable)

4. December 19, 2011

(Date of Organization)

5. Perpetual

(Duration: Year limited liability company will cease to exist or "perpetual")

6. N/A

(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. 12201 Bluegrass Parkway, Louisville, KY 40299

(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:

LP Manager, LLC, 12201 Bluegrass Parkway, Louisville, KY 40299

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Healthcare and personnel services

Sandra Adams

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.)

Sandra Adams, VP/General Counsel

Typed or printed name of signee

FILED
JUL 6 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Silver Angels, LLC

If unavailable, the alternate to be used in the state of Florida is:

Silver Angels Home Care, LLC

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System

(Name)

1200 South Pine Island Road

Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

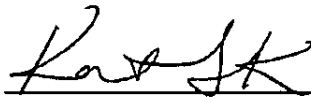
Plantation

FL 33324

City/State/Zip

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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)

Katie Szramek
Assistant Secretary

\$ 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 "SILVER ANGELS, 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 THIRTIETH DAY OF DECEMBER, A.D. 2011.

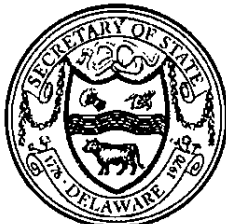
AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SILVER ANGELS, LLC" WAS FORMED ON THE NINETEENTH DAY OF DECEMBER, A.D. 2011.

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

5083644 8300

111354821

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




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9264402

DATE: 12-30-11