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Special Instructions to Filing Officer:		





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SECRETARY OF STATE

APPROVED AND FILED

D. BRUCE

JUL **1 1** 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE			
	Nar	ne of Limited Liability Company	
The end Existen	losed "Application by Foreign Limited Liab ce, and check are submitted to register the al	ility Company for Authorization to Transact Business in Florida," bove referenced foreign limited liability company to transact busin	Certificate of ess in Florida
Please	eturn all correspondence concerning this ma	atter to the following:	
	Giulia Chiti Block		
		Name of Person	
	Health Care Navigator	LLC	
		Firm/Company	
	4 West Red Oak Lane	- Suite 201	12 SF SF ALIAT
		Address	CRI
	White Plains, NY 1060	4	SECRETARY OF STATE ALLAHASSES, FIG.
		City/State and Zip Code	25 - 25 - 25 - 25 - 25 - 25 - 25 - 25 -
	GBlock@hcnavigator.n	et	77.7
	E-mail address: (t	o be used for future annual report notification)	
For furt	ner information concerning this matter, pleas	se call;	; •
	Giulia Chiti Block	Area Code & Daytime Telephone Number	
	Name of Person	Area Code & Daytime Telephone Number	
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	ed is a check for the following amoun \$125.00 Filing Fee \$\int_{\text{Certificate of Stat}}^{\text{S130.00 Filing Fee}}\$	& []\$155.00 Filing Fee & []\$160.00 Filing Fee, Certificate	c

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 RUSINESS IN THE STATE OF FLORIDA:

1. AP2012-Oakwood Garden, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	-	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabi Company," "L.L.C," "LLC.")	- written lity	
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 38-3875514 (FEI number, if applicable)	-	
4. May 9, 2012 (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. AP2012-Oakwood Garden, LLC c/o	ALC SEC	12
4 Red Oak Lane, Suite 201, White Plains, NY 10604 (Street Address of Principal Office)	RETARY OF	OI JUL
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:	FONE	PH 12: 20
Argent Properties 2012, LLC	5.141	<u> </u>
4 Red Oak Lane, Suite 201, White Plains, NY 10604	-	
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of rethe 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 each of the translator must be submitted.)	- cords in	
11. Nature of business or purposes to be conducted or promoted in Florida:		
Real Estate Ownership		
(May)	-	
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.)		
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 Com	npany is:	
AP2012-Oakwood Garde	n, LLC	
If unavailable, the alternate to be used in t	he state of Florida is:	
2. The name and the Florida street address	s of the registered agent and office are:	
Capitol Corporate Se	ervices, Inc.	TAS -
	(Name)	ECRE LLAH
155 Office Plaza Dr. Suite A		SECRETARY TALLAHASSE
Florida Street A	ddress (P.O. Box <u>NOT</u> ACCEPTABLE)	SEC. D
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.

Delanie (asc. asst. Dec. (Signature)

\$ 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 "AP2012-OAKWOOD GARDEN, 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-SIXTH DAY OF JUNE, A.D. 2012.

5152717 8300

120733653

AUTHENTY CATION: 9670926

DATE: 06-26-12

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