

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000254861 3)))



H120002548813ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this	page.
Doing so will generate another cover sheet.	

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 (850)222-1092 Phone Fax Number : (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Rmail Address:

### Foreign Limited Liability Company VHA Upper Midwest, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

K. SALY EXAMINER OCT 23 2012

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

10/22/2012

10/55/5015 10:14 8656336092

## 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:

nsent of the managers or managing members adopting the ultern propany," "L.L.C.," "LLC.")	
Delaware (Jurisdiction under the law of which foreign limited liability company is organized)	75-2848112 (FEI number, if applicable)
(Date of Organization) 5.	Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
Upon Qualification (Date first transacted business in Flor (See sections 608.501 & 608.502 F.S. 6	o determine penalty liability)
7601 France Avenue, #500, Centennial Lakes 11	22 P
Edina, MN 35435 (Street Address of	Principal Office)
If limited liability company is a manager-managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the managed of the name and usual business addresses of the name and	ing members or managers are as follows:
	- 1
Attached is an original certificate of existence, no more than 90 day jurisdiction under the law of which it is organized. (A photocopy is station of the certificate under oath of the translator must be submit Nature of business or purposes to be conducted or producted for which limited liability companies may be organized.	romoted in Florida: Transacrany or all lawful
Signature of a member or an author (In accordance with section 608.408(3), F.S., the execution	prized representative of a member.

Typed or printed name of signee

10/22/2012 16:14 8656336092

MET GRACE THAN STY ENGINE PROSE

## 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.

VHA Upper Midwest, LLC					
If unavailable, the alternate to be used in the state of Florida is:					
2. The nam	e and the Florida street addr	ess of the registered agent and office are:			
	C T Corporation System				
		(Name)			
	1200 South Pine Island Road	ı			
		Address (P.O. Box NOT Acceptable)			

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.

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

C T Corporation System

Michael E. Jones

10/55/5015 76:14 8656336092 CT CORPORATION PAGE 03/04

# Delaware

PAGE 1

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "VHA UPPER MIDWEST, 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-SECOND DAY OF OCTOBER, A.D. 2012.

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

2994485 8300

121151513

You may verify this certificate online

Jeffrey W. Bullock, Secretary of State

DATE: 10-22-12

10/22/2012 16:14 8656336092 CT CORPORATION