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To:

Division of Corporations

Fax Number

: (850)617-6383

from:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023
Phone : (850)222-1092

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.\*\*

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## Foreign Limited Liability Company BKD ISLAND LAKE HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

K. SALY EXAMINER

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#### COVER LETTER

SUBJECT	r, BKD Island Lake Ho		
		Name of Limited Liability Compar	зу
The encloses,	sed "Application by Foreign Limited , and check are submitted to register the	Liability Company for Authorizations above referenced foreign limited	n to Transact.Business in Florida," Certificate of liability company to transact business in Florida
Please retu	urn all correspondence concerning this	s matter to the following:	
	Susan	Jeffrey	·
		Name of Person	
	Brook	dale Living Communi	ties, Inc.
		Pirm/Company	
	515	North State Street	- 1750
		Address	
	Ch	icago,_IL 60654	
		City/State and Zip Code	
		jeffrey@brookdalel	iving.com
	•	s; (to be used for future annual repo	ort notification)
For further	r information concerning this matter,	ol¢ase call:	
		at ()_	
,	Name of Person	Area Code: & Daytime Tel	ephone Number
D R P.	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle	
	annumore 1 to 1 to 1 1 1	Tallahassee, FL 32301	•
Englosed	is a check for the following an 125.00 Filing Fee \$\int_{\text{Cartificate of }}\)	Fee & \$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy

## 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:

THAT THE PROPERTY OF THE PROPE	
1. BKD Island Lake Holdings, LLC	
(Name of Foreign Limited Limitity 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 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 3. 46-1159935	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	
4. October 3, 2012 <sub>5. perpetual</sub>	
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")	
6. To 72 72 72 72 72 72 72 72 72 72 72 72 72	
6.  (Date first transacted business in Florida, if prior to registration.) (See sections 608.507 & 608.502 F.S. to determine penalty liability)  7. 111 Westwood Place, Suite 400, Brentwood, TN 37027  (Street Address of Principal Office)	-71
7, 111 Westwood Place, Suite 400, Brentwood, TN 37027	
	m
The second	$\bigcirc$
(Street Address of Principal Office)	
8. If limited liability company is a manager-managed company, check here	ŀ
9. The name and usual business addressas of the managing members or managers are as follows:	
W.E. Sheriff, 111 Westwood Place, Suite 400, Brentwood, TN 37027	
Mark W. Ohlendorf, 6737 W. Washington, Suite 2300, Milwaukee, WI 53214	
John P. Rijos, 515 N. State Street, Suite 1750, Chicago, IL 60654	
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:	
own/operate/manage senior living facilities	
A TO TO	
Sint of the state	
Signature of a prepatier of an authorized representative of a member.  (In accordance with section 56.408(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, P.S.)	
John P. Rijos	
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 L	imited Liability Company is:	
BKD Island La	ake Holdings, LLC	
If unavailable, the alt	ernate to be used in the state of Florida is:	
2. The name and the	Florida street address of the registered agent and office are:	<del></del>
	C T Corporation System	
	(Name)	
	1200 South Pine Island Road	
<del></del>	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation PL 33324	
	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.

Katie Szremsk
Assistant Secretary
(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

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "BKD ISLAND LAKE HOLDINGS, 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 FIFTEENTH DAY OF NOVEMBER, A.D.
2012.

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

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

AUTHENTICATION: 9988586

DATE: 11-15-12

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