(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:	
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JAN 3 0 2013 G. McLEOD



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ACCOUNT NO. : 12000000195
REFERENCE : 513778 7100061
AUTHORIZATION: publican
COST LIMIT : \$ 125.00/
ORDER DATE : January 29, 2013
ORDER TIME : 1:02 PM
ORDER NO. : 513778-010
CUSTOMER NO: 7100061
FOREIGN FILINGS
NAME: DISCOVERY VILLAGE AT TAMPA PALMS LLC
XXXX QUALIFICATION (TYPE: LL)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight EXT# 52956
EXAMINER:

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 LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	REGISTER	A FO	REIGN
DISCOVERY VILLAGE AT TAMPA PALMS 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 attaconsent of the managers or managing members adopting the alternate name. The alternate name must include Company," "L.L.C," "LLC.")	ch a copy o	of the v Liabili	vritten ty
2. DELAWARE 3. APPLIED FOR			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	ı		
4. JANUARY 2 9 , 2013 5. PERPETUAL			
(Date of Organization) (Duration: Year limited liability companies or "perpetual")	y will ceas	e to	
6(Date first transacted business in Florida, if prior to registration.)			
(See sections 608.501 & 608.502 F.S. to determine penalty liability)	1r ²³		
7. 3301 BONITA BEACH ROAD, SUITE 208	2000 - E. A.T.	ಪ	
BONITA SPRINGS, FL 34134	3	K NAU	-
(Street Address of Principal Office)	$\frac{2}{3} \frac{1}{3} \frac{1}$	Ø	"Battawan
8. If limited liability company is a manager-managed company, check here X	FT 64	AK 10:	Samuel Sa
9. The name and usual business addresses of the managing members or managers are as fol	lows!	3	"Marie"
Richard Hutchinson, 3301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134	34-		
Thomas Harrison, 3301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134			
Jeff Henning, 3301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134			
Todd Carlson, 3301 Bonita Beach Rd., Suite 208, Bonita Springs, FL 34134 O. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having	ng custody (of recor	rds in
he jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a forei	gn languag	e, a	
ranslation of the certificate under cath of the translator must be submitted.)			
1. Nature of business or purposes to be conducted or promoted in Florida: Any and all lav	vful busin	iess	
for which limited liability companies may be organized under DE and FL law		·	
May Atoldman			
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 u			
penalties of perjury that the facts stated herein are true. I am aware that any false information subm document to the Department of State constitutes a third degree felony as provided for in s.81')	
JOY S. GOLDMAN		,	
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	Company is:
DISCOVERY VILLAGE AT TAM	PA PALMS, LLC
If unavailable, the alternate to be used	d in the state of Florida is:
2. The name and the Florida street ac	ddress of the registered agent and office are:
Corporation Service (Company
	(Name)
1201 Hays Street	
Florida Str	eet Address (P.O. Box NOT ACCEPTABLE)
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.

Corporation Service Company

Sue G. Knight
Assistant Vice President

\$ 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 "DISCOVERY VILLAGE AT TAMPA PALMS
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-NINTH DAY OF
JANUARY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "DISCOVERY VILLAGE AT TAMPA PALMS LLC" WAS FORMED ON THE TWENTY-NINTH DAY OF JANUARY, A.D. 2013.

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

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۲.,

Jeffrey W Bullock, Secretary of State

AUTHENTYCATION: 0176920

DATE: 01-29-13

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