(1/5)

Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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.

(((H130002166093)))



H130002166093ABC

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:

ö

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 address please.**

Email Address:

Foreign Limited Liability Company Senior Lifestyle Development Company, LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help 3. Shevers OCT 0 1 2013

CR2B027 (9/10)

COVER LETTER

TO:

Registration Section Division of Corporations

SIIR IRCT.

Senior Lifestyle Development Company, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Maria Principe

Name of Person

DLA Piper LLP (US)

Firm/Company

203 N. LaSalle St., Suite 1900

Address

Chicago, IL 60601

City/State and Zip Code

maria.principe@dlapiper.com

E-mall address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Maria Principe

,312 、368-3404

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassoc, FL 32314 STREET ADDRESS:
Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallehassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐

\$130.00 Filing Fee & Certificate of Status

☐ \$1.55.00 Filing Fee & Certified Copy ☐ \$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 TOTRANSACT BUSINESS IN THE STATE OF FLORIDA:

(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 Liab Company," "LL.C." "LLC."	 s written ility	ı
2. Illinois 3. 61-1696867	 -	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4. 11/05/2012 (Date of Organization) 5. perpetual (Duration: Year limited Hability company will cease to exist or "perpetual")	, -	
6		
(Date first transacted business in Florids, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)		
7. 111 E. Wacker Drive, Suite 2200	_ क्षा %	
Chicago, IL 60601	Ġ.	*/6., H
(Street Address of Principal Office)		£ -01
8. If limited liability company is a manager-managed company, check here	,200 1.30	2
9. The name and usual business addresses of the managing members or managers are as follows:	.35)	Part. T
Senior Lifestyle Holding Company, LLC	<u>ာ</u>	
111 E. Wacker Drive, Suite 2200		
Chicago, IL 60601		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language	, a	i in
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: develop real estatement.	_	
•	 '	

Stephen J. Levy, Manager
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 Liab	ility Company is:					
Senior Lifestyle Development Company, LLC							
If unavailable	, the alternate to be	used in the state of Florida is:					
2. The name	and the Florida stre	et address of the registered agent and office are:					
		C T Corporation System	Ca.				
		(Name)		ij	v Pitter		
		1200 South Pinc Island Road	全 為	ŞEP	*******		
Florida Street Address (P.O. Box NOT ACCEPTABLE)			ુ	್ಷ ಒಡಾಲು <u>ಕ</u>			
	Plantation	FL 33324		27m 740 200	Transport		
		City/State/Zip		: 10	To the same of		

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.

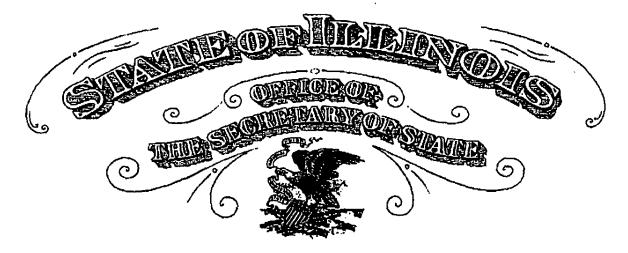
Signature)

James M. Halpin
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)

File Number

0414523-2



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

SENIOR LIFESTYLE DEVELOPMENT COMPANY, LLC, HAVING ORGANIZED IN THE STATE OF ILLINOIS ON NOVEMBER 05, 2012, APPEARS TO HAVE COMPLIED WITH ALL PROVISIONS OF THE LIMITED LIABILITY COMPANY ACT OF THIS STATE, AND AS OF THIS DATE IS IN GOOD STANDING AS A DOMESTIC LIMITED LIABILITY COMPANY THE STATE OF ILLINOIS.



Authentication #: 1327301212
Authenticate at: http://www.cyberdrivellinois.com

In Testimony Whereof, Thereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 30TH

day of SEPTEMBER

A.D.

2013

SECRETARY OF STATE