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SECRETARY OF STATE TALLAHASSFE, FLORIDA

Lange DEC 10 2014

COVER LETTER

TO: Registratión Section Division of Corporations			
SUBJECT: Titan Senior Living, 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:			
Christopher M. Pacheco, Egg. Name of Person			
Titan Development			
<u>6300 Riverside Plaza NW, Suite 200</u>			
Albuquerque NM 87/20 Gity/Stafe and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
Christopher Pacheco at 505 998-0163 Name of Contact Person Area Code Daytime Telephone Number			
MAILING ADDRESS:STREET ADDRESS:Division of CorporationsDivision of CorporationsRegistration SectionRegistration SectionP.O. Box 6327Clifton BuildingTallahassee, Fl. 323142661 Executive Center CircleTallahassee, Fl. 32301			
Enclosed is a check for the following amount: \$\Begin{array}{c} \Begin{array}{c} \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$ \\$			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

	REIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1	(Name of Foreign Limited Liability Company, Just include "Limited Liability Company," "L.L.C.," or "LLC.")
/I.C	
Liabil	me unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited lity Company," "L.L.C." or "LLC.")
2	Texas risdiction under the law of which foreign limited liability ompany is organized) 3. EIN 46-2346215 (FEI number, if applicable)
(Jui co	risdiction under the law of which foreign limited liability (FEI number, if applicable) impany is organized)
4	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5	
	6300 Riverside Plaza NW, Suite 200, Albuguerzur, N. (Street Address of Principal Office)
_	(Street Address of Principal Office)
6. <u> </u>	
	(Mailing Address)
7.]	The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
190	rs: vin L. Reid, 6300 Riverside Plaza NW, Albuguerque, NM 8
NC Mar	odrawa Dalam 1370 Diversida Blaza IIII Allana
TT P	ndrew Dolan, 6300 Riverside Plaza NW. Albuguerque N en F. Spencer, 6300 Riverside Plaza NW, Albuguerque, NM ert, Browning, 6300 Riverside Plaza NW, Albuguerque, NM
Ku	urt Browning, 6300 Riverside Plaza NW, Albugulersue, NV
Da	Wid Drunet 6300 kiverside flaza www, Alaugherzher, we ttached is an original certificate of existence, no more than 90 days old, duly authenticated by the official
s. Au navir	ng custody of records in the jurisdiction under the law of which it is organized. (A photocopy is pot
accep	ptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translato
nust	t be submitted)
	SE N
	Signature of an authorized person
In acco m awa	ordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the lact stated herein and are that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for \$317.1850 F.S.)
	Christopher M. Pacheco

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), 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	y is:	
<u>Titan</u> S	enior Living, U	LC	
	Iternate to be used in the sta		
2. The name and th	e Florida street address of t	he registered agent and office are:	
	Brian Hudso	Name)	
	1028 Lake . Florida Street Address	Sumter Landing, 2 8 (P.O. BOX NOT ACCEPTABLE)	<u></u> f1∞r
	The Villages,	FL 32/62 City/State/Zip	_
liability company at registered agent and statutes relating to the	the place designated in this agree to act in this capacity we proper and complete perj	accept service of process for the above certificate, I hereby accept the appoin y. I further agree to comply with the j formance of my duties, and I am famil ed agent as provided for in Chapter 6	ntment as provisions of all liar withzing
Statutes.			
	15		NRY ASSE
(Signature)			AMII: 21
	\$ 25.00 E \$ 30.00 C	Filing Fee for Application Designation of Registered Agent Certified Copy (optional) Certificate of Status (optional)	DEC -2 AMII: 28 ORETARY OF STATE AHASSIELFLORIDA

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

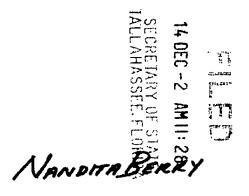
Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Titan Senior Living, LLC (file number 801731681), a Domestic Limited Liability Company (LLC), was filed in this office on February 08, 2013.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on November 25, 2014.





Nandita Berry Secretary of State

Dial: 7-1-1 for Relay Services Document: 579946650002