

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H15000126723 3)))



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Division of Corporations

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P	4	1	Address	

Foreign Limited Liability Company AH Bonita Springs III LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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5/27/2015

COVER LETTER

BJECT:	AH Bonita Springs III LLC		<u> </u>		
		Name of Limit	d Liability Company		
				ion to Trunsact Business in Floried liability company to transact b	
asc return	all correspondence concerning	ng this matter to the	following:		
	Susan R. McMaster				_
		N	ame of Person		_
	Jaffe Rain Hener & Wels	is PC			<u> </u>
		¥	irm/Company		
	27777 Franklin Road, Su	ite 2500			
			Address		-
	Southfield, MI 48034				_
		· City/S	tate and Zip Code		
	sıncınaster@jaffelaw.com				
	is-ma	il address: (to be use	d for future annual rep	on notification)	
further in	formation concerning this ma	tter, please call:			
Sus	an R. McMaster		at (²⁴⁸	v 727-1485	
-	Name of Cuntact	Person	Area Code	Daytime Telephone Number	_
Divi Reg	ILING ADDRESS: sion of Corporations istration Section Box 6327	Divisiu Registr	ET ADDRESS: on of Corporations ation Section Building		
Tali	ahassee, FL 32314		xecutive Center Circusses, FL 32301	ele	
	s a check for the following 125.00 Filing Fee \$130	ig amount: 0.00 Filing Fee &	□ \$155.00 Filins	Fee & S 160.00 Filing Fee	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

AH Bonita Springs III LLC (Name of Foreign Limited Diability Company; must include "Limited Liability Company," "L.J.,C.," or "L.J.,C.,"	
(realise of resign statistics statistics of the state statistics statistics (realise statistics)	
(If name unavailable, eater alternate name adopted for the purpose of transacting business in Florida. The alternate name must include 'Liability Company," "L.L.C," or "LLC,")	'Limited
2. Michigan 3. N/A	
(FEI number, if applicable) company is organized)	
4. Upon Filing	
(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	
5. One Towne Square, Suite 1600	SE SE
Southfield, M1 48076	
(Street Address of Principal Office)	TSSE 21
6. One Towne Square, Suite 1600	
Southfield, MI 48076	6
(Mailing Address)	
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:	7.
HSRE-AHR Bonita Springs, LLC, Sole Member and Manager, Paul Stodulski, Authorized Representative	—
One Towne Square, Suite 1600, Southfield, MI 48076	
	
8. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is no acceptable. If the certificate is in a foreign language of translation of the certificate under oath of the translation of the certificate under oath of the translation.)	01
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjuty that the facts stated am aware that any false information submitted in a document to the Department of State constitutes a third degree felting as provided for in s.817.155, F.	
Susan R. McMaster, Authorized Person	
Typed or printed name of signee	

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.

AH Bonita Springs	he Limited Liability		
If unavailable, the	e alternate to be used	in the state of Florida is:	
2. The name and	the Florida street ad	dress of the registered agent and office are:	
}	NRAI Services, Inc.		
-		(Name)	121
1	1200 South Pine Island R	oad	原常 🗾
-	Florida Str	per Address (P.O. Box NOT ACCEPTABLE)	FLORITOR O
i	Plantation	FL 33324	Series of
_		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 605, Florida Statutes.

NRAI Services, Inc.

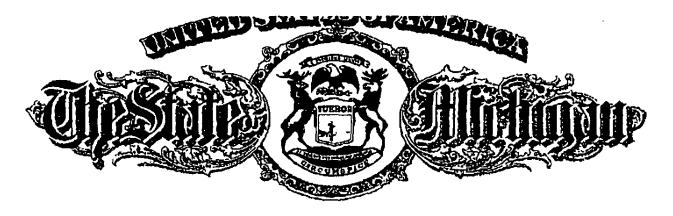
By: Lakrisha Davis, Ass. Secretary
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30,00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)





This is to Certify That

AH BONITA SPRINGS III LLC

was validly organized on July 3, 2014 as a Limited Liability Company. Said Limited
Liability Company is validly in existence under the laws of this state and has satisfied its annual filing obligations.

This certificate is issued pursuant to the provisions of 1993 PA 23, as amended, to attest to the fact that the company is in good standing in Michigan as of this date.

This certificate is in due form, made by me as the proper officer, and is entitled to have full faith and credit given it in every court and office within the United States.



Sent by Facsimile Transmission 1312329

In testimony whereof, I have hereunto set my hand, in the City of Lansing, this 26th day of May, 2015

Alan J. Schefke, Director Corporations, Securities & Commercial Licensing Bureau