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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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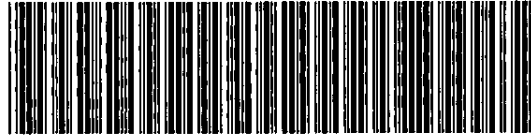
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LS
LaSalle Legal Services, PLLC

November 13, 2015

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

RE: Tallahassee Tapestry Senior Housing Management, LLC

To whom it is concerned,

Please find enclosed the following:

The Cover Letter and Application by Foreign Limited Liability Company for
Authorization to Transact Business in Florida for Tallahassee Tapestry Senior Housing
Management, LLC.

A Registered Agent Consent Form from Paracorp Incorporated.

A Certificate of Good Standing / Existence from the State of Delaware for Tallahassee
Tapestry Senior Housing Management, LLC.

A check made out to the Florida Department of State in the amount of \$160.00 for the
filing fee, a Certificate of Status and a Certified Copy.

Please contact me with any questions, comments, or requests for additional materials. Thank
you for your courtesy and professionalism with regard to this matter.

Sincerely,



Brent LaSalle
Attorney at Law

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Tallahassee Tapestry Senior Housing Management, 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:

Brent LaSalle

Name of Person

LaSalle Legal Services, PLLC

Firm/Company

2001 Killbrew Drive, Suite 170

Address

Bloomington, MN 55425

City/State and Zip Code

blasalle@lawlasalle.com

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

For further information concerning this matter, please call:

Brent LaSalle

651
at ()

442-3462

Name of Contact Person

Area Code

Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy | <input checked="" type="checkbox"/> \$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 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Tallahassee Tapestry Senior Housing Management, 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. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware 3. 47-3769437
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 2001 Killebrew Drive, Suite 170
Bloomington, MN 55425
(Street Address of Principal Office)

6. 2001 Killebrew Drive, Suite 170
Bloomington, MN 55425
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Paracorp Incorporated
Office Address: 155 Office Plaza Drive, First Floor
Tallahassee, Florida 32301
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)


8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Thomas W. LaSalle, Chief Executive Officer; Richard C. Bienapfl Chief Operating Officer

2001 Killebrew Drive, Suite 170

Bloomington, MN 55425

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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, F.S.

Brent LaSalle

Typed or printed name of signer

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATE OF FLORIDA
REGISTERED AGENT CONSENT FORM

DATE: 11/10/2015

ENTITY NAME: Tallahassee Tapestry Senior Housing Management LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Sharon Cooke

Sharon Cooke, Assistant Secretary
Paracorp Incorporated

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

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Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "TALLAHASSEE TAPESTRY SENIOR HOUSING MANAGEMENT, 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 TENTH DAY OF NOVEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "TALLAHASSEE TAPESTRY SENIOR HOUSING MANAGEMENT, LLC" WAS FORMED ON THE THIRTY-FIRST DAY OF MARCH, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.



5720271 8300

SR# 20150857867

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

A handwritten signature in black ink, appearing to read "JB", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 10395316

Date: 11-10-15