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CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

850-508-1891 (cell)

Date:	$\frac{3/10/17}{\text{ACCT. }1201600000072}$	\bigvee
Name:	American House Management Wildward LC	
Document #:	· · · · · · · · · · · · · · · · · · ·	
Order #:	10399983	
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 13, 2017

CT CORP

Merchan SUBJECT: AMERICAN HOUSE MANAGEMENT WILDWOOD LLC

Ref. Number: W17000021062

We have received your document for AMERICAN HOUSE MANAGEMENT WILDWOOD LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

An individual must sign on behalf of the business entity you have designated as the registered agent.

Please return your document, along with a copy of this letter, within 60 days or vour filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Salv Regulatory Specialist II

Letter Number: 417A00004729

COVER LETTER

то:	Registration Section Division of Corporations	
SUBJE	American House Management Wildwood LLC	
50.001		imited Liability Company
		any for Authorization to Transact Business in Florida," Certificate of need foreign limited liability company to transact business in Florida
Please	e return all correspondence concerning this matter to the fe	ollowing:
	Susan R. McMaster	
	Nai	me of Person
	Jaffe Raitt Heuer & Weiss PC	
	Fire	m/Company
	27777 Franklin Road Suite 2500	
		Address
	Southfield, MI 48034	
	City/Sta	ate and Zip Code
	smcmaster@jaffelaw.com	
	E-mail address: (10 be used	for future annual report notification)
For fur	urther information concerning this matter, please call:	
	Susan McMaster	248 727-1485 at ()
	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
Enclos	sed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy 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. American House Manag	ign Limited Liability Company; m	ist incl	ude "Limite	d Liability Company," "L.I	J.C.," or "L	LC.")
	ternute name adopted for the purpo	se of tr	ansacting b	isiness in Florida. The alter	nate name	must include "Limited
Liability Company," "L.L.C,"	or "LLC.")					
Delaware		3	. N/A		_	
company is organized)	of which foreign limited liability			(FEI number, if ap	plicable)	
Upon Filing				·		50 8
	(Date first transacted busin (See sections 605.0904 & 60	ess in I 5.0905.	Florida, if p F.S. to det	rior to registration.)		
One Towne Square, Su	rite 1600					題为
Southfield, MI 48076				· · · · · · · · · · · · · · · · · · ·		2017 MAR 10
<u></u>	(Street Address of	Princi	pal Office)		-	7.5
One Towne Square, Sui	<u>-</u>	-	, ,			7:2
Southfield, MI 48076						21
	(Mailing	Addre	ss)			•
/. Name and street addres	s of Florida registered agent: (I	.O. B	ox <u>NOT</u> a	cceptable)		
Name:	National Registered Agents, I	nc.				
Office Address:	1200 South Pine Island Road					
	Plantation			Florida 33324		
	(City)			(Zip o	code)	
designated in this application complywith the provision in the provision of the obligations of the contractions of the contrac	gistered agent and to accept se tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent. National Register By:	ntm <i>e</i> ni e prope	t as registe er and con	red agent and agree to desplete performance of m	rct in this ny duties, d	capacity. I further ag and I am familiar with
	(Kegi:	дегец а	igent s sign	aure) james Mi. Triaipi	m - Asst. S	secretary
The name, title or capa	acity and address of the person(s) who	has/have a	uthority to manage is/arc) ;	
AHR Senior Living LLC,	Member, One Towne Square, S	luite 1	600, South	field, MI 48076		
						
		certific		foreign language, a trans		
This demonstrate in a set				•	that are	also information
This document is executed submitted in a document to	I in accordance with section 605 the Department of State consti	tutes a	third degre	rida Statutes. I am aware e felony as provided for	in s.817.1	sise information 55, F.S.
	Susan R. McMaster, Authoriz-	ed Pers	son			

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "AMERICAN HOUSE MANAGEMENT WILDWOOD

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 NINTH DAY OF MARCH, A.D. 2017.

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





6341175 8300 SR# 20171691416 Authentication: 202170592

Date: 03-09-17