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| (R                                      | equestor's Name)       |        |  |  |  |
|---|------------------------|--------|--|--|--|
| (Address)                               |                        |        |  |  |  |
| (Address)                               |                        |        |  |  |  |
| (C                                      | ity/State/Zip/Phone #) |        |  |  |  |
| PICK-UP                                 | ☐ WAIT                 | MAIL   |  |  |  |
| (Business Entity Name)                  |                        |        |  |  |  |
|   |                        |        |  |  |  |
| (Document Number)                       |                        |        |  |  |  |
| Certified Copies                        | Certificates of        | Status |  |  |  |
| Special Instructions to Filing Officer: |                        |        |  |  |  |
|   |                        |        |  |  |  |
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# FLORIDA DEPARTMENT OF STATE Division of Corporations

March 22, 2017

RESTORATION SENIOR LIVING, LLC 227 E EDGEWOOD DR FRIENDSWOOD, TX 77546

SUBJECT: RSL LIVING OF PENSACOLA, LLC

Ref. Number: W17000024544

We have received your document for RSL LIVING OF PENSACOLA, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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

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

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 617A00005474

 $\ddot{\sim}$ 

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## **COVER LETTER**

| TO: Registration Section Division of Corporations   |   |        |  |  |  |
|---|---|--------|--|--|--|
| SUBJECT: RSL LIV  | ring of Pensacola, 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   | g this matter to the following:   |        |  |  |  |
| Lo  | Name of Person  |        |  |  |  |
| Restoration Senior Living, LLL Firm/Company   |   |        |  |  |  |
| 227 E Edgewood Dr. Address  |   |        |  |  |  |
| Friendswood, TX 77546 City/State and Zip Code   |   |        |  |  |  |
| E-mail address: (to be used for future annual report notification)  |   |        |  |  |  |
| For further information concerning this matter, please call:  |   |        |  |  |  |
| Donald So   | t Person J at (281 ) 482 9700 × 105  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   |        |  |  |  |
|   | unt: 0.00 Filing Fee & Status | ficate |  |  |  |

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

IN COMPLIANCE WITH SECTION 6050902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT RUSTNESS. IN THE STATE OF ELORIDA.

|  | INESS INTHE STATE OF FLORIDA:   |   |  |
|--|---|---|--|
| 1. RSL Li  | ving of Pensacola, in Limited Liability Company; must include                             | LL C  | L WITCH  |
|  |   | of Pensacola, LLC                             |  |
| (If name unavailable, enter alto   | rnate name adopted for the purpose of ransa   |   |  |
| Liability Company," "L.L.C,"   | or "LLC.")  | al Entern                                     |  |
| 2. IEXAS (Jurisdiction under the law o   | 3   | 81-5171532<br>(FEI number, if applica         | ble)   |
| company is organized)  | 2.12.17   |   |  |
| 4  | (Date first transacted business in Flor<br>(See sections 605.0904 & 605.0905, F.S         | ida, if prior to registration.)               |  |
|  |   | i. to determine penalty liability)            |  |
| 5. <u>22</u>   | J   |   |  |
| Fne  | ndswood, 7x 7754 (Street Address of Principal C   | Office)                                       |  |
|  | E. Edgewood Dr.   | ··········                                    |  |
|  |   |   | <del></del>  |
| rne  | ndswood, TX 77546 (Mailing Address)   |   |  |
| 7. Name and street address   | of Florida registered agent: (P.O. Box  | NOT acceptable)                               | v.<br>** * .   |
| Name:  | Donald Sapaua   | •   | 3  |
|  | 1706 Olive Road   | <del>-1-)</del>                               | APR  |
| Office Address:  |   | 20611   | Solve to   |
|  | <u> Yensacola</u>   | , Florida <u>32<i>514</i></u><br>(Zip code)   |  |
| Registered agent's accept  | ince:   |   | The state of the s |
| designated in this applicati   | istered agent and to accept service of pi<br>on, I hereby accept the appointment as       | registered agent and agree to act in          | this capacity further agree  |
|  | ns of all statutes relative to the proper a<br>y position as registered agent.            | nd complete performance of my du              | ties, and I am familiar with and   |
| ,  |   | <b>&gt;</b>                                   |  |
|  | (Registered agen  | ıt`s signature)                               |  |
| 8. The name, title or capac  | ity and address of the person(s) who has  | \( \text{have authority to manage is/are:} \) |  |
| 0  | wayah - Manager   |   | Pensacola, FL 325  |
|  | Total I Interest  |   | 1011,5001177   |
|  |   |   |  |
|  |   |   |  |
| <ol> <li>Attached is a certificate of<br/>iurisdiction under the law of</li> </ol> | of existence, no more than 90 days old, d<br>f which it is organized. (If the certificate | luly authenticated by the official hav        | ing custody of records in the  |
| of the translator must be su   | omitted), A   | •   |  |
|  | Kauren Appel  |   |  |
|  | J   | horized person                                |  |
| This document is executed submitted in a document to                               | in accordance with section 605.0203 (1) the Department of State constitutes a thir        | (b), Florida Statutes. I am aware tha         | t any false information<br>.817.155. F.S.  |



Rolando B. Pablos Secretary of State

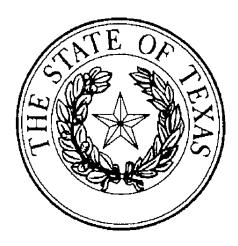
# Office of the Secretary of State

### **Certificate of Fact**

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for RSL Living Pensacola LLC (file number 802630406), a Domestic Limited Liability Company (LLC), was filed in this office on January 20, 2017.

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 March 14, 2017.





Rolando B. Pablos Secretary of State