M1700008652

(Requestor's Name)
(Address)
(Address)
(C) (C) (C) (C)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
J D.F. NIG
JUN - 111554

Office Use Only



300428480333

RECEIVED

2024 HAY 30 AM IO: 2

1 LED 024 MAY 30 AM IO:

COVER LETTER

TO: Registration Section

Divis	sion of	Corporations						
SUBJECT:	Valrice	o Retirement Residence L	LC					
SOMMET.	Name of Foreign Limited Liability Company							
Dear Sir or M	Madam	:						
The enclosed	d applic	cation, certificate and fee	(s) are submitted	for filing	g.			
Please return	all coi	respondence concerning	this matter to the	e followi	ng:			
	_	Name of Person		_				
		Firm/Company						
		TimeCompany						
		Address		_				
		City/State and Zip Co	ode	_				
E-mail add	dress: (to be used for future annu	ual report notific	ation)				
For further in	nforma	tion concerning this matte	er. please call:					
			at (_)				
	Nan	ne of Person	Area Cod	e & Dayı	time Telephone Number			
	ng Addı			Street A				
Registration Section Division of Corporations				Registration Section Division of Corporations				
P.O. Box 6327				The Centre of Tallahassee				
Tallahassee, FL 32314				2415 N	I. Monroe Street, Suite 810 assee, FL 32303			
		a check for the following	•					
□\$25 Filing	Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Certified		□ \$60 Filing Fee, Certificate of Status & Certified Copy			
CR2E055 (9/15))				Sertified Copy			

2

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

Name of limited liability Company as it appears State: Valrico Retirement Residence LLC	on the records of the Florida Department of
Enter new principal office address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	2024 HAY 30
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	30 AHIO: 22
2. The Florida document number of this limited liab	ility company is: M17000008652
3. Jurisdiction of its organization: Washington	
4. Date authorized to do business in Florida: 10/10	/2017
SECTION II (5-9 complete only the applicable ch	
5. New name of the limited liability company: (must o	contain "Limited Liability Company. " "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted f copy of the written consent of the managers or mana must contain "Limited Liability Company," "L.L.C.	or the purpose of transacting business in Florida and attach a aging members adopting the alternate name. The alternate name or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office add	officer address on our records, enter the name of the new lress here:
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida Street Address
	, Florida
the provisions of all statutes relative to the proper at and accept the obligations of my position as register	and agree to act in this capacity. I further agree to comply with nd complete performance of my duties, and I am familiar with red agent as provided for in Chapter 605, F.S. Or, if this a the registered office address, I hereby confirm that the limited

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:							
Title/ Capacity	Name	<u>Address</u>	Type of Action				
			DAdd				
	-		□Remo				
	_		□Remo				
	-		□Remo				
			□Add				
	-		□Remo				
			□Add				
aforementioned am	icate, if required: no more than 90 days endment(s), duly authenticated by the che law of which this entity is organized.	fficial having custody of recor	□Remo				

•

Filing Fee: \$25.00

Secretary of State

1, STEVE.R. HOBBS, Secretary of State of the State of Washington and custodian of its seal, hereby issue this certificate that according to records on-file in this office,

CERTIFICATE OF CONVERSION

From

VALRICO RETIREMENT RESIDENCE LLC.

a/an Washington Limited Liability Company, converted out of the State of Washington

to

VALRICO RETIREMENT RESIDENCE LLC,

a/an Delaware Limited Liability Company effective on the date indicated below.



CANADA PARA

Effective Date: 05/21/2024 Issued Date: 05/29/2024

UBI Number: 604 173 272

Given under my hand and the Seal of the State of Washington at Olympia, the State Capital

Steve R. Hobbs, Secretary of State