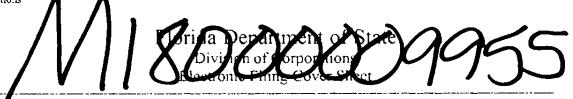
To: Page 2 of 4
Division of Corporations



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To:	Division of Corporations Fax Number : (350)617-638	3 3		
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	Account Name : C T CORPORAT	3	<u> </u>	
	Phone : (614)280-33: Fax Number : (954)208-08:	15	107	
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Corporate Filing Menu

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

	TION 605,0902, FLORIDA STATUTIES, THE FOL SINESS IN THE STATE OF FLORIDA:	LOWING IS SUBMITTED TO REG	ISTER A FOREIGN LIMITED LIABILITY	
	Limited Liability Company; must include "Limited I.			
CEstima mavadatio, onter alternate n	nnst uchipial für ihe purcuse ut transaction business in Florida	The alternate name most include "Empired	Liability Company," TLLLC," or "ELC.")	
2. DELAWARE The State of the Sw. of which lowing limited dishibity company is regarded.		3. (FEI n	(FEI number it applicable)	
4.	(Date first transacted line) too in Florida, if prior to org (See sections 605,090) & 605,0905, F.S. to colemnina	istration.) penalty fiability)		
5. 7825 Washington Avenue South, Suite #810 (Siece Address of Philosophia Otike)		6. 7825 Washington Avenu	c South, Suite #810	
(Steet Address or Principal Ottic) Minneapolis, MN 55439		(Milling) Minneapolis, MN 5543	• <u>•</u>	
VII			2	
7. Name and street address	s of Florida registered agent: (P.O. Box <u>)</u>	NOT acceptable)	5 TH	
Name:	NRAI Services, Inc.	and the second of the second o	=	
Office Address:	1200 South Pine Island Road	-	e 15	
	Plantation (Cry)	, Florida 33324	aurikka utokau-den p	
to comply with the provisi and accept the obligation	tion. I hereby accept the appointment as is ions of all statutes relative to the proper as of my position as registered agent. Stephance Honey Stephanced agent's ne	nd complete performance of n	ry duties, and I am familiar with	
8. The name, title or cap: Title or Capacity:	icity and address of the person(s) who has/ Name and Address:	have authority to manage is/are Title or Canacity:	:: Name and Address:	
CEO and Treasurer	Dan R. Peterka 7825 Washington Ave S #810 Minneapolis MN 55439	COO and Secretary	Melinda Seifert 7825 Washington Ave S#810 Minneapolis MN 55439	
(Use attachments if neces	sary)			
9. Attached is a certificate jurisdiction under the law of the translator must be st	of existence, no more than 90 days old, du of which it is organized (If the certificate in abmitted)	ily authenticated by the official is in a foreign language, a trans	having custody of records in the dation of the certificate under oath	
10. This document is exec submitted in a document to	uted in accordance with section 605,0203 (to the Department of State constitutes a third Signature of	1) (b), Florida Statutes I am av I degree felony as provided for HOLISTO ESSON an advorced person	ware that any false information in s.817.155, F.S.	

Terry Nelson, Authorized Person

Page 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "GRAND LIVING AT SARASOTA, 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 FIFTH DAY OF NOVEMBER, A.D. 2018.

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

6765603 8300
SR# 20187475246
You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 203833949

Date: 11-05-18