## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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### Foreign Limited Liability Company WINTER SPRINGS RETIREMENT RESIDENCE OPCO, LLC

Certificate of Status	U
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Estimated Charge	\$155.00

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

	TION 605 0902, FLORIDA STATUTES. THE FC ISINESS INTHE STATE OF FLORIDA:	OLLOWING IS SUBMITTED TO REGISTER A	FOREIGN LIMITED LIABILITY	
Winter Springs Retiren	ient Residence Opco, LLC			
(Name of Foreign	nent Residence Opco, LLC Limited Libility Company; must include "Limited	Liebility Company," "L.L.C.," o: "LLC.")		
	ame adopted for the purpose of transacting business in Flor		7 1 1 C 7 4 1 1 C ")	
	aine adopted for the purpose of transacting business in Flor	ida. The allerwise name mast include "Lantied Cabbiny Co	zaipany, 'L.E.C. or LEC ,	
2. Washington (Junsdiction under the lass of w	nich foreign hmitee hebility company is organized)	3. (FBI number, if a)	ရုပ်(သပ် ၄)	
4	(Date frist transacted business in Flexida, if prior to t (See section; 605 0904 & 605 0905, F.S. to determin	egistration)	•	
0210 NW Magazina N		6. 9310 NE Vancouver Mall Dr St	- 200	
5. 9310 NE Vancouver Mall Dr Ste 200 (Steet Add ess of Phikapal Office)		6. (Mailing Address)		
Vancouver, WA 98662		Vancouver, WA 98662	Vancouver, WA 98662	
7 Name and street address	is of Florida registered agent: (P.O. Box	NOT acceptable)		
Name:	C T Corporation System			
ranc.				
Office Address:	1200 South Pinc Island Road			
	Plantation	, Florida <u>33324</u> (Zig code)	_	
Registered agent's accep	(City)	(Zip code)		
to comply with the provis- and accept the obligation	tion, I hereby accept the appointment as ions of all statutes relative to the proper s of my position as registered agent.  By: CT Corporation System	and complete performance of my dutie.  Bree Zahner, Asst. Secretary	s, and I am familiar with	
	(Registered agent's s	Ngmature)	- -	
C. The second distance of	acity and address of the person(s) who ha	sthate authority to magaze inface.	*3√s ≥	
Title or Capacity:	Name and Address:		une and Address.	
Managing-Member	Hawthorn IL Opco, LLC		₹ 3	
Transpirity transport	9310 NE Vancouver Mall Dr		<u> </u>	
	Vancouver, WA 98662	<del>-</del>	<u> </u>	
Authorized Rep	Jill Heary			
Additionized Nep	9310 NE Vancouver Mall Dr			
	Vancouver, WA 98662	· —		
(Use attachments if neces	sary)		₹~ <b>5</b>	
jurisdiction under the law	of existence no more than 90 days old	duly authenticated by the official having	custody of records in the	
of the translator must be s	of which it is organized. (If the certificate	e is in a forcign language, a translation o	the certificate under oath	
10. This document is exec	of which it is organized. (If the certificate	3 (1) (b), Florida Statutes, I am aware that	any false information	
10. This document is exec	of which it is organized. (If the certificate ubmitted)  cuted in accordance with section 605.0203 to the Department of State constitutes a thing.	3 (1) (b), Florida Statutes, I am aware that ird degree felony as provided for in 5.817	any false information	
10. This document is exec	of which it is organized. (If the certificate ubmitted)  cuted in accordance with section 605.0203 to the Department of State constitutes a thing.	3 (1) (b), Florida Statutes, I am aware that	any false information	
10. This document is exec	of which it is organized. (If the certificate ubmitted)  cuted in accordance with section 605.0203 to the Department of State constitutes a thing.	3 (1) (b), Florida Statutes, I am aware that ird degree felony as provided for in 5.817	any false information	



1, KIM WYMAN, Secretary of State of the State of Washington and custodian of its seal, hereby issue this

### CERTIFICATE OF EXISTENCE

OF

### WINTER SPRINGS RETIREMENT RESIDENCE OPCO, LLC

I CERTIFY that the records on file in this office show that the above named entity was formed under the laws of the State of Washington and that its public organic record was filed in Washington and became effective on 11/15/2018.

I FURTHER CERTIFY that the entity's duration is Perpetual, and that as of the date of this certificate, the records of the Secretary of State do not reflect that this entity has been dissolved.

I FURTHER CERTIFY that all fees, interest, and penalties owed and collected through the Secretary of State have been paid.

I FURTHER CERTIFY that the most recent annual report has been delivered to the Secretary of State for filing and that proceedings for administrative dissolution are not pending.

> Issued Date: 11/21/2018 UBI Number: 604 353 245

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

Kim Wyman, Secretary of State

Date Issued: 11/21/2018