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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (614) 230-3338
Fax Number : (954) 206-0545

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

Foreign Limited Liability Company
AHR-PSL ST PETE LLC

| | |
|-----------------------|----------|
| Certificate of Status | 0 |
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

20190304 10:39:55

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Corporate Filing Menu

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MAR 0 2019

HONOR ORIGINAL DATE 03-01-19

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

IN COMPLIANCE WITH SECTION 605.002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REQUEST A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. AHR-PSL St. Pete LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," or "L.L.C.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "L.L.C.")

2. Delaware 3. 83-3778285
(Jurisdiction under the law of which foreign limited liability company is organized) (EIN number, if applicable)

4. _____
(Date first received of documents in Florida (least 10 days prior to registration)
(See sections 605.002 and 605.003, F.S., to determine priority liability)

5. One Towne Square
(Street Address of Principal Office)
Suite 1600
Southfield, Michigan 48076

6. One Towne Square
(Mailing Address)
Suite 1600
Southfield, Michigan 48076

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: C T Corporation System Michael Jonas
(Registered agent's signature) (Signature Secretary)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are.

| Title or Capacity: | Name and Address: | Title or Capacity: | Name and Address: |
|--------------------|--|--------------------|-------------------|
| <u>Manager</u> | <u>Paul A. Stodulski</u> <u>One Towne Square, Suite 1600</u> <u>Southfield, MI 48076</u> | | |
| <u>Manager</u> | <u>Dodd Crutcher</u> <u>5310 Live Oak St., 5th Floor</u> <u>Dallas, TX 75204</u> | | |

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s 817.155, F.S.

Paul A. Stodulski
(Signature of an authorized person)

Paul A. Stodulski

(Typed or printed name of signer)

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "AHR-PSL ST PETE 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 TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2019.

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



7299861 8300

SR# 20191575603

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 202345936

Date: 02-28-19

To: Page 2 of 5
850-617-6381

2019-03-04 10:39:55 CST
3/4/2019 9:36:51 AM PAGE 1/001

19542080845 From: Ranae McGraw
Fax Server

HONOR ORIGINAL DATE 03-01-19



March 4, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

C T CORPORATION SYSTEM

SUBJECT: AHR-PSL ST PETE LLC
REF: W19000020742

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Application is illegible.

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.

Dionne M Scott
Regulatory Specialist II

FAX Aud. #: B19000070159
Letter Number: 619A00004363

2019-03-04 10:39:55

P.O BOX 6327 - Tallahassee, Florida 32314