(Red	juestor's Name)	
(Add	lress)	<u> </u>
(Add	iress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer.	,
	. 7.1. ~	
<u> </u>	17462	

Office Use Only



400340716014

2007 L. 10 17:10:41

t i

I GLASS FEB 2 1 2020





#### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

February 19, 2020

CT CORP

SUBJECT: YBOR CITY SNF REALTY LLC

Ref. Number: W20000017462

CORRECTED Please Allow For Same File Date

Same File Date 3/20/2000
Conversion has been
Fled.

We have received your document for YBOR CITY SNF REALTY LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L19000239852.

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) 245-6052.

Tacarri K Glass Regulatory Specialist II

Letter Number: 020A00003692

### **CT CORP**

•

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate:	2/18/2020	
	<del></del>	Acc#I20160000072	4: DW
Name:	Ybor City	SNF Realty LLC	
Document #:			
Order #:	1267941	2 - 71	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	20:11.
Filing: 🗸	Certif Plain: COGS		This is part of a 1 - 25 filing.
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amou	int: \$ 160	File:  The conversion first.  The registration second
	•	Thank you!	

#### **CT CORP**

#### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

**Date:** 2/18/2020

D	ate:	2/18/2020	- w: DW
		Acc#I20160000072	- 4:() - W
Name:	Ybor City	SNF Realty LLC	
Document #:			
Order #:	1267941	2 - 71	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing:			
Apostille/Notarial Certification:		Country of Destination: Number of Certs:	25.
Filing: 🗸	Certifi Plain: COGS:		This is part of a 1 - 2 √ . filing!
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amou	nt: \$ 160	File:/  The conversion first.  The registration second

#### **COVER LETTER**

Name of Limited Liability Company  Inclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in ence, and check are submitted to register the above referenced foreign limited liability company to transe return all correspondence concerning this matter to the following:  Christine Dziak  Name of Person  Ulmer & Berne LLP  Firm/Company  1660 West 2nd Street, Suite 1100  Address	n Florida,' nsact busii
c return all correspondence concerning this matter to the following:  Christine Dziak  Name of Person  Ulmer & Berne LLP  Firm/Company  1660 West 2nd Street, Suite 1100	n Florida,' sact busíi
Christine Dziak  Name of Person  Ulmer & Berne LLP  Firm/Company  1660 West 2nd Street, Suite 1100	
Name of Person  Ulmer & Berne LLP  Firm/Company  1660 West 2nd Street, Suite 1100	
Ulmer & Berne LLP Firm/Company 1660 West 2nd Street, Suite 1100	
Firm/Company 1660 West 2nd Street, Suite 1100	
1660 West 2nd Street, Suite 1100	
Address	
Cleveland, Ohio 44113	
City/State and Zip Code	
chunyherzka@yahoo.com	
E-mail address: (to be used for future annual report notification)	
urther information concerning this matter, please call:	
Yisroel Herzka 848 480-3857	
Name of Contact Person Area Code Daytime Telephone	Vumber
Mailing Address:  Registration Section  Street Address:  Registration Section	
Division of Corporations Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee	
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

 $\mathbf{x}_{i} = (\mathbf{x}_{i}, \dots, \mathbf{x}_{i}) \in \mathbf{x}_{i}$ 

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Limited Liability Company; must include "Limited L		omotav ""I I C " nr "F	
Pelaware	marine adopted for the purpose of managering dustriess in Front	84-3528118	impany, c.c.c. or a	
,	high foreign limited liability company is organized)	3. (FEI number, if app	logble)	
Durisdiction under the law of w	nich foreign immire nachtig company is organizati	(i Et autocs, a app	indicate y	
	(Date first transacted business in Fiorida, if prior to reg (See sections 605.0904 & 605.0905, F.S. to determine)	istration.) penalty liability)		
		6. (Mailing Address)		
rt Address of Principal Office)		(Mailing Address)		
	ss of Florida registered agent: (P.O. Box 1)	NOT_acceptable)		
Name and street address  Name:  Office Address:		<u>√OT</u> acceptable)		
Name:	C T Corporation System	33324	19 :Zi 61 .1732	
Name:	C T Corporation System  1200 South Pine Island Road	33324	19	
Name: Office Address: gistered agent's accepting been named as reignated in this applications by the provis	C T Corporation System  1200 South Pine Island Road  Plantation  (City)  Stance: Egistered agent and to accept service of prodution, I hereby accept the appointment as reions of all statutes relative to the proper as s of my position as registered agent.	, Florida 33324 (Zip code)  ocess for the above stated limited liability in the agent and agree to act in this and complete performance of my duties,	y company at th	
Name: Office Address: gistered agent's accepting been named as reignated in this application on ply with the provisil accept the obligation	C T Corporation System  1200 South Pine Island Road  Plantation  (City)  Stance: egistered agent and to accept service of proteion, I hereby accept the appointment as rions of all statutes relative to the proper as	33324, Florida (Zip code) cocess for the above stated limited liability tegistered agent and agree to act in this	y company at th	

8. For initial index manage (up to six (	ing purposes, list names, title or capacity and a s) total]:	ddresses of the primary	members/man	agers or persons authorized to
Title or Capacity:	Name and Address:	Title or Capacity	<u>":</u>	Name and Address:
□Manager	Summit Care Realty Holdings LLC Name:	□Manager	Name:	
■Member	Address: 267 Broadway	□Member	Address:	
□Authorized	Brooklyn, New York 11211	□Authorized		
Person		Person		
□Other	Other	Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		5
□Other	Other	□Other		□Other
				<del>~</del>
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	<u></u>
□Authorized		□Authorized		****
Person		Person	•	
□Other	□Other	□Other		Other
9. Attached is a cert jurisdiction under the of the translator mu.	is executed in accordance with section 605.020 ment to the Department of State constitutes a th	orida Department of Sta duly authenticated by the e is in a foreign language 3 (1) (b), Florida Statute ird degree felony as pro-	te Annual Rep te official havi ge, a translation es. I am aware	ort form.  In greatedy of records in the confidence of the certificate under oath that any false information
	Daniel A. Gottesman, Authorized Repr	printed name of signee	<del></del>	<del></del>

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "YBOR CITY SNF REALTY 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 EIGHTEENTH DAY OF FEBRUARY, A.D. 2020.

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

17:01:18 : 10:41



Authentication: 202404456

Date: 02-18-20