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	Account Name : C T CORPOR		Γ.
	Account Number : FCA00000002 Phone : (614)280-33		
	Fax Number : (954)208-08		
0810A	Foreign Limited L	iability Company	
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: <u>-</u>	Palm Springs SNF Op	perations Holdings L	LC.
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From: Kimberly Laughrey

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

	rations Holdings LLC					
(Name of Foreign I	inuted Fiability Company; must ownide "Limited	Liability Com	priny ""[T.L.C.," at "T.L.C.")			
r name missaifalde, entes altemate ne	ane adopted for the purpose of featisacting barings in Flo	nda. He alterna	te name must metude "Lamited Lodidi	ls Conyany,* "LI	.C. or 1.	£' ' 1
Delaware		,				
duradiction under the law of wh	ach foreign limited liability company is organized)	J	(1FI number, .	f applicable)		
	(Note first translated business in Plands of poor to receive sections 605 0904 & 603 1805, F.S. in determin	getration) c penalty habita	(*)			
267 Broadway, Brookly	vn. New York, 11211	267	Broadway, Brooklyn, Nev	York 1121	l	
Same a description of the same state of the		6	(Nadiog Addit (4)			
Single Condition of Figure 1980 Control						
			<u> </u>			
					(F)	
Name and street addres	s of Florida registered agent (P.O. Box	NOT acces	ntable)		<u>~~</u>	
. Trume and sever address	2 0. 1 (au an 142) marga a a a a a a a a a a a a a a a a a a				52 1 SEP	ĩ ,
	C.T Corporation System			:	27	\$ P
Name [*]	C i Corporation System		<u> </u>		70	. •
	1.260 County Direct Along I Doggs				PH 3:	
Office Address:	1200 South Pine Island Road		_	<u>.</u>	င္ပ	٠ هيه ، *
	Dispusion		31304	1	<u>ل</u> ب	
	Plantation		Florida			
	(Coy)		(Zip code)			
Registered agent's accept	tance:					
The same of the same of the same	gistered agent and to accept service of p	rocess for t	he above stated limited lia	bility compai this canacity	ny at the I farth	place er aore
taving oven namea as re		regimerea	ugem and agree to acrin i	mo enpuent.	7,117111	
lesionated in this amplicat	ons of all statutes relative to the proper of	ınd comple	te performance of my dut	ies, and Lam	familiai	r with
designated in this applicate to comply with the provision	ons of all statutes relative to the proper of my position as registered agent.	ınd comple	te performance of my dut	ies, and I am	familiai	r with

(Registated agent's signature)

From: Kimberly Laughrey

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total].

Title or Capacity:	Name and Address:	Title or Capacit	<u>y:</u>	Name and	Addre	2881
□Manager	Tandem FL Operations Holdings LLC Name.	∐ Manager	Name,			
∃Member	Address: 267 Broadway	☐ Member	Address:		<u>.</u>	
□Authorized	Brooklyn, New York 11211	I Authorized			·- -	
Person	-	Person				
10thci		_Chher		□Other_		
□Manager	Name:		Name:			
□Member	Address:	I Member	Address:			
□Authorized		Authorized				
Person		Person		- · ·		
□Other				∃Other_	<u> </u>	
		·			SEP 2	
⊒Manager	Name:	□Manager			:	, 1
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Person		Person			6	<u> </u>
∃Other		_Other		□Other_		

Important Notice. Use an attachment to report more than six (o). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

- 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 outh 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 fidse information submitted in a document to the Department of State constitutes a third degree felony as provided for in \$817,155, E.S.

/s/ Daniel A. Gottesman
Signature of an authorized guison
Daniel A. Gottesman, Authorized Representative
In American London



Page 1

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

DELAWARE, DO HEREBY CERTIFY "PALM SPRINGS SNF OPERATIONS HOLDINGS

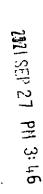
LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS

IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF

THIS OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF SEPTEMBER, A.D.

2021.

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



Authentication: 204259802

Date: 09-27-21