

MZ4000001526

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W24-20487

Office Use Only



300415617363

02/07/24---01002---007 **125.00

2024 FEB -7 AM 11:38

FILED

ALLAHASSEE, FLORIDA

2024 FEB -6 PM 4:38

RECEIVED

FEB 06 2024

K. Brumbley



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 6, 2024

RUTLEDGE ECENIA
119 S. MONROE ST., STE. 202
TALLAHASSEE, FL 32301

SUBJECT: MOMENTUM SENIOR LIVING LLC
Ref. Number: W24000020487

We have received your document for MOMENTUM SENIOR LIVING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

KYLE D BRUMBLEY
Regulatory Specialist II Supervisor

Letter Number: 824A00002633

RECEIVED

2024 FEB -7 PM 3: 35

INVESTMENT DIVISION

Rutledge | Ecenia

119 South Monroe Street, Suite 202
Tallahassee, FL 32301

PO Box 551
Tallahassee, FL 32302

February 7, 2024

By Hand Delivery

Florida Department of State
Division of Corporations
Registration Section
Florida Department of State
2415 North Monroe Street, Suite 810
Tallahassee, Florida 32303

Re: Application by Foreign Limited Liability Company for Authorization to Transact
Business in Florida for Momentum Senior Living LLC.

Dear Sir or Madam:

Enclosed is the application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Momentum Senior Living LLC. As requested, a certificate of good standing is enclosed to complete the filing.

Thank you for your assistance in processing the application. Please do not hesitate to call our office should you have any questions or if any additional information is needed. You may also reach me by email at Amanda@rutledge-ecenia.com.

Sincerely,
/s/ Amanda Hessein

Amanda Hessein

enclosures

[Handwritten signature]
2/7/24
119 South Monroe Street, Suite 202
Tallahassee, FL 32301
PO Box 551
Tallahassee, FL 32302

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:

1. Momentum Senior Living LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

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

2. California
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 88-0780681
(FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. Momentum Senior Living LLC
(Street Address of Principal Office)

6. Momentum Senior Living LLC
(Mailing Address)

18100 Von Karman Ave, Suite 170

18100 Von Karman Ave, Suite 170

Irvine, CA 92612

Irvine, CA 92612

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

Name: Northwest Registered Agent LLC

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702
(City) (Zip code)

2024 FEB - 7 AM 11:38

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.


(Registered agent's signature)

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:**

☒ Manager Name: Josh Johnson

☒ Member Address: _____

☐ Authorized 18100 Von Karman Ave, Suite

Person Irvine, CA 92612

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: James Biggs

☒ Member Address: _____

☐ Authorized 18100 Von Karman Ave, Suite

Person Irvine, CA 92612

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: _____

☐ Member Address: _____

☐ Authorized _____


Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). 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 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.


Josh Johnson (Feb 5, 2024 09:39 PST)

Signature of an authorized person

Josh Johnson

Typed or printed name of signee



Secretary of State

Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: MOMENTUM SENIOR LIVING LLC
Entity No.: 202204910381
Registration Date: 02/16/2022
Entity Type: Limited Liability Company - CA
Formed In: CALIFORNIA
Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of February 07, 2024.

SHIRLEY N. WEBER, PH.D.
Secretary of State

Certificate No.: 180271930

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at bizfileOnline.sos.ca.gov.