# SIGNATURE:

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title NH FLORIDA REALTY, L.L.C. Name Address FLOOR City-State-Zip: NEW YORK NY 10019

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: JUDAH ROSENBERG

Electronic Signature of Signing Authorized Person(s) Detail

#### 2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0000001778

Entity Name: 2201 NE 170TH ST., L.L.C.

#### **Current Principal Place of Business:**

C/O GREYSTONE HEALTHCARE MANAGEMENT CORP. 4042 PARK OAKS BLVD., SUITE 300 TAMPA, FL 33610

#### **Current Mailing Address:**

C/O GREYSTONE HEALTHCARE MANAGEMENT CORP. 4042 PARK OAKS BLVD., SUITE 300 TAMPA, FL 33610

## FEI Number: 13-4120830

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

MGRM

152 WEST 57TH STREET, 60TH

FILED Apr 23, 2013 Secretary of State CC3570915506

Certificate of Status Desired: No

04/23/2013

Date

Date