

L16000231233

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000314250 3)))



H160003142503ADCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

FILED
16 DEC 23 PM 4:47
SECRETARY OF STATE
TALLAHASSEE FLORIDA

To: Division of Corporations
Fax Number : (850) 617-6391

From: Account Name : LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.
Account Number : 072720000036
Phone : (407) 843-4600
Fax Number : (407) 843-4444

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
SONATA VIERA MANAGER, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

03/11/16 08:44:41

Electronic Filing Menu Corporate Filing Menu Help

T. BURCH
DEC 27 2016

FILED
16 DEC 23 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
SONATA VIERA MANAGER, LLC

ARTICLE I - NAME

The name of this limited liability company is Sonata Viera Manager, LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

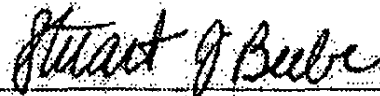
The mailing address and street address of the principal office of the Company is 301 East Pine Street, Suite 730, Orlando, Florida 32801.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 301 East Pine Street, Suite 730, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is Shelley Esden.

ARTICLE IV - MANAGEMENT

The Company is a member-managed limited liability company. The initial member of the Company is Sonata Health Care, LLC, a Florida limited liability company.



Stuart J. Beebe, Authorized Representative

ACCEPTANCE OF REGISTERED AGENT

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 certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.



Shelley Esden