

M170000008363

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

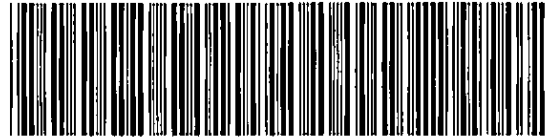
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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17 SEP 29 PM 4:54  
17 SEP 29 AM 1:08

D. SCOTT  
OCT 2 2017

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195  
REFERENCE : 841773 7864759  
AUTHORIZATION :   
COST LIMIT : \$ 125.00

ORDER DATE : September 29, 2017  
ORDER TIME : 3:02 PM  
ORDER NO. : 841773-015  
CUSTOMER NO: 7864759

FOREIGN FILINGS

NAME: NEW PORT RICHEY REAL ESTATE  
INVESTORS, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

         CERTIFIED COPY  
XXX          PLAIN STAMPED COPY  
         CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER: \_\_\_\_\_

17  
09/29/17  
11:00 AM  
T.C.

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** New Port Richey Real Estate Investors, LLC  
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Joan Thurmond  
Name of Person  
Life Care Centers of America, Inc.  
Firm/Company  
3570 Keith Street, NW  
Address  
Cleveland, TN 37312  
City/State and Zip Code  
423-473-5868  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joan Thurmond at (423) 473-5868  
Name of Contact Person Area Code Daytime Telephone Number

**MAILING ADDRESS:**  
Division of Corporations  
Registration Section  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET ADDRESS:**  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

**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. New Port Richey Real Estate Investors, 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. Tennessee (Jurisdiction under the law of which foreign limited liability company is organized)      3. Applied For (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. 3570 Keith Street, NW (Street Address of Principal Office)      6. same (Mailing Address)  
Cleveland, TN 37312

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

Name: Corporation Service Company  
Office Address: 1201 Hays Street  
Tallahassee, Florida 32301  
(City) (Zip code)

**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.*

By: Roxanne Turner (Registered agent's signature)      Roxanne Turner  
 Corporation Service Company      Asst. Vice President

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<u>Corporate Manager</u>	<u>Developers Investment Company II, Inc.</u> <u>3570 Keith Street, NW</u> <u>Cleveland, TN 37312</u>		

(Use attachments if necessary)

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.

Joan E. Thurmond  
Signature of an authorized person

Joan E. Thurmond  
Typed or printed name of signer



**Tre Hargett**  
Secretary of State

**Division of Business Services**  
**Department of State**  
State of Tennessee  
312 Rosa L. Parks AVE, 6th FL  
Nashville, TN 37243-1102

**CFS**  
SUITE B  
992 DAVIDSON DRIVE  
NASHVILLE, TN 37205

September 20, 2017

**Request Type: Certificate of Existence/Authorization**  
Request #: 0251350

Issuance Date: 09/20/2017  
Copies Requested: 1

**Document Receipt**

Receipt #: 003583589 Filing Fee. \$20.00  
Payment-Account - #00009 CFS, NASHVILLE, TN \$20.00

**Regarding: New Port Richey Real Estate Investors, LLC**  
Filing Type: Limited Liability Company - Domestic Control #: 923883  
Formation/Qualification Date: 09/20/2017 Date Formed: 09/20/2017  
Status: Active Formation Locale: TENNESSEE  
Duration Term: Perpetual Inactive Date:  
Business County: BRADLEY COUNTY

**CERTIFICATE OF EXISTENCE**

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

**New Port Richey Real Estate Investors, LLC**

- \* is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- \* has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business;
- \* has appointed a registered agent and registered office in this State;
- \* has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Tre Hargett  
Secretary of State

Processed By: Nichole Hambrick

Verification #: 024227221