## L0100000260

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EXAMINER



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ACCOUNT NO. : I2000000195 REFERENCE : AUTHORIZATION COST LIMIT : ORDER DATE: March 16, 2011 ORDER TIME : 4:09 PM ORDER NO. : 711039-005 CUSTOMER NO: 7775081 DOMESTIC AMENDMENT FILING NAME: MIMA REAL ESTATE, L.L.C. EFFECTIVE DATE: XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Matthew Young -- EXT# 2962

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	MIMA Real d Liability Compa A Florida Limited	Estate, L.L.C my as it now app Liability Compan	C. lears on our records.)	
The Articles of Organization for this Limited Florida document number <u>L0100000026</u>	Liability Company		January 2, 2001 and assigned	
This amendment is submitted to amend the fo	llowing:			
A. If amending name, enter the new name	of the limited liab	oility company l	<u>1ere</u> :	
The new name must be distinguishable and end w "L.L.C."	rith the words "Lim	ited Liability Con	npany," the designation "LLC" or the abbreviation	
Enter new principal offices address, if appli	cable:	4500 Door Street		
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:		Toledo, O	hio 43615	
		4500 Dorr Street		
(Mailing address MAY BE A POST OFFICE BOX)		Toledo, Ohio 43615		
registered agent and/or the new registered o	office address her	<u>'e</u> :	our records, enter the name of the new	
Name of New Registered Agent:		Corporation Service Company		
New Registered Office Address:	1201 Hays Street (Enter Florida street address)			
	Tallahassec		, Florida <u>32301</u>	
		(City)	(Zip Code)	

New Registered Agent's Signature, if changing Registered Agent:

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 as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
mgrm	Health Care REIT, Inc.	4500 Dorr Street Toledo, Ohio 43615	_☑ Add _□ Remove
mgr	Joseph A. McClure M.D.	200 E. Sheridan Street Melbourne, Florida 32901	Add Remove
mgr	James M. Ronaldson M.	200 E. Sheridan Street Melbourne, Florida 32901	_
	·		Add Remove
			Add Remove
			Add Remove
D. If amending	g any other information, enter change(s	) here: (Attach additional sheets, if necessary.)	_
			-
	M		<b></b>
Dated	March 10 , 2011  Signature of a member or	authorized representative of a member	

Erin C. Ibele, Senior Vice President-Administration and Corporate Secretary

Typed or printed name of signee of Health Care REIT, Inc., mgrm

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