		~ (850) 222-2666 or (	300) 969-1666 . Fax	(850) 222-1666
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/ РНОТО СОРУ		FILING	Qualific	Him
WHR DelAwn CORPORATE NAME & DOCUMENT #)	ee, Inc.		0000789 -09/20/02 *****70.	34834-2 01021015 00 *****70.00
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CLAY INSTRUCTIONS				

## APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT **BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. NHR/Delawa	are, Inc. oration; must include the word "INCORPOR	ΑТ	ED" "COMPANY" "CORPORATION" of CO.	
words or abbra	eviations of like import in language as will cle or partnership if not so contained in the name	earl	y indicate that it is a corporation instead of a	FILE
2. Delaware		3.	52-2069100	m
(State or count	ry under the law of which it is incorporated)		(FEI number, if applicable)	Ō
4. December 15		5.	Perpetual DE O	
(Da	ate of incorporation)		(Duration: Year corp. will cease to exist or "perpetual")	
6. Upon qualific	cation			
(Date first trans			transacted business in Florida, insert "upon qualification."), 607.1502 and 817.155, F.S.)	
7. 100 Vine Str	eet, Murfreesboro, TN 37130			
	(Principal office	add	ress)	
P. O. Box 13	98, Murfreesboro, TN 37133-1398			
	(Current mailing	add	ress)	
8. General Parl	iner of NHR/OP, L.P., which invests in re	al e	state property	
(Purpose	e(s) of corporation authorized in home state o	or co	untry to be carried out in state of Florida)	
9. Name and st	reet address of Florida registered age	nt:	(P.O. Box or Mail Drop Box NOT acceptable)	
Name:	NRAI Services, Inc.			
Office Address:	526 E. Park Avenue			
	Tallahassee		, Florida 32301	
	(City)		(Zip code)	
10 Pagistavad	agent's acceptance:			
		erv	ice of process for the above stated corporation at the p	lace
designated in th	is application, I hereby accept the appo	int	nent as registered agent and agree to act in this capac	ity. I
			relative to the maner and commists merferment of an	

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.

NRAI Services, Inc.

By:

(Registered agent's signature)

Charles A. Coyle - assistant Secretary 11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

## 12. Names and business addresses of officers and/or directors:

A. DIRECTORS
Chairman: W. Andrew Adams
Address: 100 Vine Street, Suite 1400
Murfreesboro, TN 37130
Vice Chairman: Robert G. Adams
Address: 100 Vine Street, Suite 1400
Murfreesboro, TN 37130
Director: Richard F. LaRoche, Jr.
Address: 100 Vine Street, Suite 1400
Murfreesboro, TN 37130
Director:
Address:
B. OFFICERS
President: W. Andrew Adams
Address: (same as above)
Address
Vice President: Robert G. Adams
Address: (same as above)
1000ess
Secretary: Richard F. LaRoche, Jr.
Address: (same as above)
Treasurer: W. Andrew Adams
Address:
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
13. Ruhard FAROS
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Richard F. LaRoche, Jr., Secretary  (Typed or printed name and capacity of person signing application)

PAGE 1

## Delaware

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "NHR/DELAWARE, INC." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTH DAY OF SEPTEMBER, A.D. 2002.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NHR/DELAWARE, INC." WAS INCORPORATED ON THE FIFTEENTH DAY OF DECEMBER, A.D. 1997.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL REPORTS HAVE BEEN FILED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE BEEN PAID TO DATE.

02 SEP 20 PM 2: 06
SECRETARY OF STATE
ALL AHASSEF FLORIDA



Harriet Smith Windsor, Secretary of State AUTHENTICATION: 1966770

DATE: 09-04-02

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