

Florida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number: 113615003626 Phone : (407) 650-1000

fax Number : (407)540-2699

\*\*Enter the email address for this business entity to be used for future: annual report mailings. Enter only one email address please.\*\* Email Address:

> FOREIGN PROFIT/NONPROFIT CORPORATION CHT Symphony Manor MD Tenant Corp.

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## 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.

| (If name unavail        | able in Florida, enter alternate corporate nar  | me adopted for the purpose of transacting business in Florida)                                    |
|-------------------------|---|---|
| Delaware                | <del>.</del>  | 3 90-0903434  |
|                         | under the law of which it is incorporated)  | (FEI number, if applicable)   |
| October                 | 31, 2012  | <sub>5.</sub> perpetual   |
|                         | of incorporation)   | (Duration: Year corp. will cease to exist or "perpetual")   |
| upon qua                | alification   |   |
| 450 S Or                | (SEE SECTIONS 607.1501 & 60   | ss in Florida, if prior to registration) 17.1502, F.S., to determine penalty liability)  EL 20201 |
| 430 3. 01               | ange Avenue, Orlando, I   |   |
| PO Boy 4                | 920, Orlando, FL 32802  | 22.60   |
| 1 0 000 7               | · ····· · , · · · · · · · · · · · · · ·   |   |
| I O BOX 4               | (Current mailing a  | address)  |
|                         |   | address)  |
| lessee of               | (Current mailing of senior living facility  | address) or country to be carried out in state of Florida)  |
| lessee of               | (Current mailing of senior living facility  | or country to be carried out in state of Florida)   |
| lessee of               | (Current mailing of senior living facility s) of corporation authorized in home state or  | or country to be carried out in state of Florida)   |
| Purpose() Name and stre | (Current mailing of Senior living facility s) of corporation authorized in home state or et address of Florida registered agent: (                  | or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)                      |
| lessee of (Purpose)     | (Current mailing of senior living facility s) of corporation authorized in home state or et address of Florida registered agent: ( Amy J. Patterson | or country to be carried out in state of Florida)  (P.O. Box NOT acceptable)                      |

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation 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.

(Registered agent's signature)

<sup>11.</sup> 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.

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| 12. Names and business addresses of officers and/or directors:   | 10 100 20 00 1 1                              |
|--|---|
| A. DIRECTORS   | 12 NOV 20 PM 1: 40                            |
| Chairman: PLEASE SEE ATTACHED  | SECRETARY OF STATE UNLUMBASSEE, OF GROAD      |
| Address:   |   |
|  |   |
| Vice Chairman:   |   |
| Address;   |   |
| · · · · · · · · · · · · · · · · · · ·  |   |
| Director:  |   |
| Address:   |   |
|  |   |
| Director:  |   |
| Address:   |   |
|  |   |
| B. OFFICERS  |   |
| President: PLEASE SEE ATTACHED   |   |
| Address:   |   |
| ·  |   |
| Vice President:  |   |
| Address:   |   |
|  |   |
| Secretary:   |   |
| Address:   |   |
| Treasurer:   |   |
| Address:   |   |
| NOTE: If necessary, you may attach an addendum to the application listing  | ng additional officers and/or directors.      |
| 13. Som House  |   |
| The officer or director signing this document (and who is listed in number   |   |
| are true and that he or she is aware that false information submitted in a do a third degree felony as provided for in s.817.155, F.S. | cument to the Department of State constitutes |
| Amy J. Patterson, Assistant Secretary  |   |
| (Typed or printed name and capacity of person sign   | ning application)                             |

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12 NOV 20 PH 1: 40

SECRETARY OF STATE TALLAHASSEE, FLORESA

| Name               | Address                                    |                                       |
|--------------------|--|---------------------------------------|
| Holly J. Greer     | 450 S. Orange Ave., Orlando, FL 32801      |                                       |
| Joseph T. Johnson  | 450 S. Orange Ave., Orlando, FL 32801      |                                       |
| Sharon A. Yester   | 450 S. Orange Ave., Orlando, FL 32801      |                                       |
|                    |  |                                       |
| Officers           |  |                                       |
| Name               | Title                                      | Address                               |
| Stephen H. Maufdin | President                                  | 450 S. Orange Ave., Orlando, FL 32801 |
| Holly J. Greer     | Senior Vice President/Secretary            | 450 S. Orange Ave., Orlando, FL 32801 |
| Joseph T. Johnson  | Senior Vice President/Treasurer            | 450 S. Orange Ave., Orlando, FL 32801 |
| Kevin R. Maddron   | Senior Vice President                      | 450 S. Orange Ave., Orlando, FL 32801 |
| Sharon A. Yester   | Senior Vice President                      | 450 S. Orange Ave., Orlando, FL 32801 |
| Kay S. Redlich     | Senior Vice President Finance & Technology | 450 S. Orange Ave., Orlando, FL 32801 |
| Ixchell C. Duarte  | Senior Vice President                      | 450 S. Orange Ave., Orlando, FL 32801 |
| Erin M. Gray       | Vice President                             | 450 S. Orange Ave., Orlando, FL 32801 |
| Joshua J. Taube    | Vice President                             | 450 S. Orange Ave., Orlando, FL 32801 |
| Ату J. Patterson   | Assistant Secretary                        | 450 S. Orange Ave., Orlando, FL 32801 |



The First State

SECRETARY OF STATE LALLAHASSEE, FLORES

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHT SYMPHONY MANOR MD TENANT CORP." 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 THIRTY-FIRST DAY OF OCTOBER, A.D. 2012.

AND I DO BEREBY FURTHER CERTIFY THAT THE SAID "CHT SYMPHONY MANOR MD TENANT CORP." WAS INCORPORATED ON THE THIRTY-FIRST DAY OF OCTOBER, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

5234743 8300

121179336

You may verify this certificate online at corp. deleware, gov/authver. shimi

AUTHENTICATION: 9952102

DATE: 10-31-12