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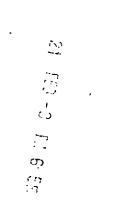
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Office Use Only



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#### **COVER LETTER**

TO: Registration Section Division of Corporati	ons		
SUBJECT: St. Johns Health	care Properties, Inc.		
Bobacer.	Name of corporation - mu	st include suffix	
Dear Sir or Madam:			
"Certificate of Existence," or	Foreign Corporation for Author "Certificate of Good Standing" poration to transact business in	and check are submitte	isiness in Florida," ed to register the
Please return all corresponder	nce concerning this matter to the	e following:	
Nicole Clements, Sr. Corporate	Paralegai		
	Name of Perso	n	
PruittHealth, Inc.			
	Firm/Company		
1626 Jeurgens Court, LEGAL D	DEPT.		
	Address		
Norcross, GA 30093			
	City/State and Zi	p code	
legalservices@pruitthealth.com			_
Ē-	mail address: (to be used for fu	ture annual report notif	ication)
For further information conce	erning this matter, please call:		
Nicole Clements	at (470 )	85-6333	
Name of Person	Area Code	Daytime Telephone	Number
STREET/COURIE. Registration Section Division of Corporat The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 323	ions assee eet, Suite 810	MAILING ADD Registration Secti Division of Corpo P.O. Box 6327 Tallahassee, FL	on rations
	FLORIDA DEPARTMENT OF S \$78.75 Filing Fee & \$\qquad \qquad \$78		' \$87.50 Filing Fee, Certificate of Status & Certified Copy

## 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.

St. Johns Health	care Properties, Inc.		
(Enter name of c	orporation; must include "INCORPORATED," orp," "Inc," "Co," or "Corp.")	"COMPANY," "CORPORATION,"	
(If name unavails	able in Florida, enter alternate corporate name ad	opted for the purpose of transacting but	siness in Florida)
2. Georgia	3.	85-2684275	
(State or countr	y under the law of which it is incorporated)	(FEI number, if applica	ble)
<b>4</b> . 07/06/2020	5.	<u> </u>	
(Date	of incorporation)	(Date of duration, if other than	perpetual)
6			
	(Date first transacted business in I (SEE SECTIONS 607.1501 & 607.150		
1626 Jeurgens Co	ourt, Norcross, GA 30093	2, 1.5., to determine permity habitity)	
7		: street address)	
	(Current mailing	address, if different)	
8. Name and stree	et address of Florida registered agent: (P.O.	Box NOT acceptable)	
Name:	Corporation Service Company		(.)
Office Address:	1201 Hays Street		· · ·
	Tallahassee	Florida 32301	්. ඨ
	(City)	(Zip code)	í J

#### 9. 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.

Lynn M. Canne Longo Lynn M. Canne Longo, AVP
(Registered agent's signature)

10. 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.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS						
Chairman	Neil L. Pruitt, Jr.	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
Director	Norcross, GA 30093	Director	Norcross, GA 30093			
President		□President				
□Vice President		□Vice President				
Secretary	□Treasurer	☐ Secretary	☐Treasurer			
■Other	Other	Other CFO	Other			
□ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
□President	<del></del>	President	<del></del>			
□Vice President		□Vice President				
Secretary	□Treasurer	Secretary	☐Treasurer			
□Other	Other	Other	Other			
☐ Chairman	Name:	□ Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		□Director				
☐ President		□President				
□Vice President		□Vice President				
Secretary	□Treasurer	Secretary	□Treasurer			
□Other	Other	□Other	Other			
Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.  12.  Signatuse of Director or Officer  The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or						
she is aware that 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.  Noil   Pruitt   Pruitt   Pruitt   Chairman and CEO						
Neil L. Pruitt, Jr., Chairman and CEO						

# State of Florida Department of State

I certify from the records of this office that ST. JOHNS HEALTHCARE PROPERTIES, INC. is a corporation organized under the laws of the State of Florida, filed on December 8, 2020, effective December 3, 2020.

The document number of this corporation is P20000095932.

I further certify that said corporation has paid all fees due this office through December 31, 2020 and that its status is active.

I further certify that said corporation has not filed Articles of Dissolution.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Twenty-first day of December, 2020



RAUNUMBUL Secretary of State

Tracking Number: 9389864846CU

To authenticate this certificate, visit the following site, enter this number, and then follow the instructions displayed.

https://services.sunbiz.org/Filings/CertificateOfStatus/CertificateAuthentication

#### **Nicole Clements**

From: OnlineWebEvent@dos.state.fl.us

Sent: Wednesday, January 6, 2021 3:30 AM

To: Legal Services

**Subject:** Corporate Dissolution - P20000095932

External email, not from PruittHealth.

Re: Document Number P20000095932

The Articles of Dissolution dissolving ST. JOHNS HEALTHCARE PROPERTIES, INC., a Florida corporation, were filed on January 04, 2021.

Should you have any questions regarding this matter, please telephone (850) 245-6050, the Amendment Filing Section.

**Division of Corporations** 

Control Number: 20114311

#### STATE OF GEORGIA

#### **Secretary of State**

Corporations Division 313 West Tower 2 Martin Luther King, Jr. Dr. Atlanta, Georgia 30334-1530

#### CERTIFICATE OF EXISTENCE

l, Brad Raffensperger, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

# St. Johns Healthcare Properties, Inc. a Domestic Profit Corporation

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 20122468 Date Inc/Auth/Filed: 07/06/2020 Jurisdiction : Georgia Print Date : 01/29/2021

Form Number : 211



Brad Rafforages

Brad Raffensperger Secretary of State



January 29, 2021

#### VIA FEDEX

Florida Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Telephone: (850) 245-6051

Re: Foreign Entity Filing Request for St. Johns Healthcare Properties, Inc.

Dear Sir or Madam:

Enclosed, please find a completed, signed copy of the foreign entity filing for St. Johns Healthcare Properties, Inc., as well as payment for the necessary fees as required and a Certificate of Good Standing from the Georgia Secretary of State.

Please also see an enclosed SASE FedEx label to return the filed documents once the foreign entity registration has been approved.

Please feel free to contact me if you have any questions or concerns.

\$1,00.013,

Nicole Clements

Senior Corporate Paralegal nclements@pruitthealth.com

Direct: (678) 533-6395

Enclosures



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached are the forms and instructions to register a foreign profit corporation to transact business in Florida. The requirements are as follows:

- Pursuant to section 607.1503(1), Florida Statutes, the attached application must be completed in its entirety.
- The corporation must submit an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of corporate records in the state or country under the law of which it is incorporated. A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.
- There is a \$70.00 registration fee and a letter of acknowledgment will be issued free of charge upon registration.
- Certification fees are optional. Please submit an additional \$8.75 if a certificate of status is needed. The fee for a certified copy of the application is \$8.75 (plus \$1 per page for each page over 8, not to exceed a maximum of \$52.50). Please check the appropriate box on the COVER letter and send one check for the total amount made payable to the Florida Department of State.
- The COVER letter included in this packet should be completed and submitted along with the certificate, application and check. Both the mailing address and courier address are noted in the COVER letter.
- Important Information About the Requirement to File an Annual Report
  All Profit Corporations must file an Annual Report yearly to maintain "active"
  status. The first report is due in the year following formation. The report must be filed
  electronically online between January 1st and May 1st. The fee for the annual report is
  \$150. After May 1st a \$400 late fee is added to the annual report filing fee. "Annual
  Report Reminder Notices" are sent to the e-mail address you provide us when you submit
  this document for filing. To file any time after January 1st, go to our website at
  www.sunbiz.org. There is no provision to waive the late fee. Be sure to file before May 1st.

Any further inquiries concerning this matter should be directed to the Registration Section by calling (850) 245-6051 or writing the Registration Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314.

CR2E007 (1/19)