4100005609

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09/16/21--01010--015 **78.75

SEP 3 0 2821 M. SOLOTOH

COVER LETTER

TO:	Registration Division of	Section Corporations					
SUBJE	CCT: Breva	ırd Healthcare Prop	erties, Inc.				
		Na	me of corporat	on - must i	nclude suffix		
Dear Si	r or Madam:						
"Certifi	cate of Exist	ication by Foreig ence," or "Certifi reign corporation	cate of Good S	tanding" ar	id check are sub	et Busi mitted	ness in Florida," to register the
Please r	return all cor	respondence con	cerning this mat	ter to the fe	ollowing:		
Oiga Bj	elkic, Corpora	ate Paralegal					
			Name	of Person			
PruittHe	ealth, Inc						
			Firm/C	ompany			
1626 Je	urgens Court,	Legal Dept.					
			Ad	ldress			
Norcros	is, GA 30092						
			City/Stat	e and Zip c	ode		
legalser	vices@pruitth						
		E-mail ad	dress: (to be use	ed for futur	e annual report r	notific	ation)
For furt	ther informat	tion concerning th	nis matter, pleas	se call:			
Olga Bjelkic 678			358-1251				
	Name of Po	erson	Area C	ode	Daytime Telep	hone ì	Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		
		for the following yable to: FLORID		NT OF STA	ATE		
	.00 Filing Fe	e = \$78 .75	Filing Fee & cate of Status	□ \$78.75	Filing Fee & ied Copy		\$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.

/If name provails	able in Florida, enter alternate comporate nam	e adopted for the purpose of transacting busine	ess in Florida)	
	abie in Pionda, enter alternate corporate nam	87-2375503	as in Florida,	
Georgia (State or county	y under the law of which it is incorporated)	(FEI number, if applicable)		
	y under the law of which it is incorporated)	(PET humber, it appricable	,	
08/27/2021		(Date of duration, if other than per		
(Date	of incorporation)	(Date of duration, if other than per	peruar)	
	(SEE SECTIONS 607.1501 & 607.	in Florida, if prior to registration) 1502, F.S., to determine penalty liability)	 	
1626 Jeurgens Co	ourt, Norcross, GA 30093			
	(Principal of	ffice <u>street</u> address)		
	(Current mail	ing address, if different)		
	·			
Name and stree	et address of Florida registered agent: (P	.O. Box <u>NOT acceptable)</u>	e•	
	et address of Florida registered agent: (P Corporation Service Company	.O. Box <u>NOT</u> acceptable)		
Name:	Corporation Service Company	.O. Box <u>NOT</u> acceptable)		
Name:		.O. Box <u>NOT</u> acceptable)		
Name:	Corporation Service Company	, Florida 32301	A Contact Property of St.	
Name:	Corporation Service Company 1201 Hays Street		A The Constant of STATE	
Name: Ffice Address: Registered aga aving been nam signated in this rther agree to c	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to accept service application, I hereby accept the appoint	, Florida 32301 (Zip code) vice of process for the above stated corpo tment as registered agent and agree to ac relative to the proper and complete perfo	t in this capac	
Name: Ffice Address: Registered againg been names ignated in this rther agree to c	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to accept service application, I hereby accept the appoint to omply with the provisions of all statutes with and accept the obligations of my p	, Florida 32301 (Zip code) vice of process for the above stated corpo tment as registered agent and agree to ac relative to the proper and complete perfo	t in this capac	
Name: ffice Address: Registered age faving been names ignated in this arther agree to c	Corporation Service Company 1201 Hays Street Tallahassee (City) ent's acceptance: led as registered agent and to accept ser application, I hereby accept the appoint comply with the provisions of all statutes	, Florida 32301 (Zip code) vice of process for the above stated corpo tment as registered agent and agree to ac relative to the proper and complete perfo to sition as registered agent.	t in this capac	

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

under the law of which it is incorporated.

the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction

A. DIRECTORS						
Chairman	Name: Neil L. Pruitt, Jr.	Chairman	Name: Randall D. Loggins Name: 1626 Jeurgens Court Address:			
□Vice Chairman	Address:	□Vice Chairman				
Director	Norcross. GA 30093	Director	Norcross, GA 30093			
■ President		□President				
□Vice President		□ Vice President				
☐ Secretary	□Treasurer	☐ Secretary	□Treasurer			
CEO CEO	Other	Other CFO	Other			
□Chairman	Name:	□Chairman	Name:			
□Vice Chairman	Address:	□Vice Chairman	Address:			
□Director		Director				
□President		□ President				
□Vice President		□Vice President				
☐ Secretary	□Treasurer	Secretary	☐Treasurer 28			
□Other	Other	□Other	□Other □ S			
	Name:	□ Chairman	Name:			
	Address:		344 C			
☐ Director		□Director				
□President		□President				
□Vice President		□Vice President				
□Secretary	□Treasurer	☐ Secretary	□Treasurer			
□Other	Other	☐Other	□Other			
Important Notice: individuals may be	Use an attachment to report more than six (6). The attachment to report more than six (6).	ment of State Annual Re	d for reporting purposes only. Non-indexed port form.			

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.

13. Neil L. Pruitt, Jr., Chairman and CEO

Control Number: 21237352

STATE OF GEORGIA

Secretary of State

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

CERTIFICATE OF EXISTENCE

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

Brevard 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 : 21835675 Date Inc/Auth/Filed: 08/27/2021 Jurisdiction : Georgia Print Date : 09/13/2021

Form Number : 211



Brad Raffmaperger

Brad Raffensperger Secretary of State





September 21, 2021

OLGA BJELKIC, CORPORATE PARALEGAL PRUITTHEALTH, INC 1626 JEURGENS COURT, LEGAL DEPT. NORCROSS, GA 30092

SUBJECT: BREVARD HEALTHCARE PROPERTIES, INC.

Ref. Number: W21000126948

We have received your document for BREVARD HEALTHCARE PROPERTIES, INC. and check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The Registered Agent must sign accepting the designation and must be a person who represents the company who is listed as the Registered Agent.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

Zeld3021

Letter Number: 121A00022748