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City	State	Zlp	Phone	_
Addr Tal	ess Llahassee,	FL 32301	222-1092	
	lestor's Name ) East Jof:	forson Stre	០៥	_
CT	CORPORATIO	Mateya NC		_

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# **CORPORATION(S) NAME**

Riveria Petisen	ent, Inc.	SECRETARY OF COR
Rrofit () NonProfit () Limited Liability Co.	() Amendment	() Merger ()
(YForeign	() Dissolution/Withdrawal	() Mark
( ) Limited Partnership ( ) Reinstatement	( ) Annual Report ( ) Reservation	() Other () Change of R.A. () Fic. Name
() Certified Copy	() Photo Copies	() CUS
( ) Call When Ready Walk In ( ) Mail Out	() Call if Problem	() After 4:30 % Pick Up 6 2
Name Avallability		8 - 3
Document Examiner	FLEAS	FILE STAMPED
Updater Verifier	7-24	110%
Acknowledgment		

CR2E031 (1-89)

W.P. Verifier

### APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION 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.	RIVIERA RETIREMENT, INC. (Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION abbreviations of like import in language as will clearly indicate that it is a corporation instead of a nor partnership if not so contained in the name at present.)		
2.	Georgia (State or country under the law of which it is incorporated)  3. (FEI number, i	(F. man (1) = 1	<del> </del>
	(State or country under the law of which it is incorporated) (FEI number, i	t anplica	ble)
4.	July 18, 1996  (Date of incorporation)  5. Perpetual (Duration: Year corp. will cease to exist or	Um a im a t	
	(Date of incorporation) (Duration: Year corp. will cease to exist or	"perpetu:	ຄາ")
6.	Moon Audification	<u>بو</u> :	
	(Date first transacted business in Florida. (See sections 607.1501, 607.1502, and 817.156, F.S.))		25.55 25.55
<b>.,</b>		70L 5t	
1.	6000 Lake Forrest Drive #200, Atlanta, Georgia 30328	•	899 846 876
	(Current mailing address)	PH12: 01	STATE
8.	Owner/Operator of Nursing Homes or Retirement Facilities (Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)		
9.	Name and street address of Florida registered agent:		
	Name: C T Corporation System		
	Office Address: Island Road Comporation System, 1200 South Pine		
	Plantation , Florida, 33324 (Zip Code)		
	Registered agent acceptance: aving been named as registered agent and to accept service of process for the above stated corporate	ation at ti	he 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 obligation of my position as registered agent. C T Corporation System

(Registered agent's signature) (Officer)

Allan P. Farmell, Asst. Secretary

(Type Name and Title of Officer)

(FL - 2189 - 11/16/94)

- 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 addresses of officers and/or directors:

A.	DIRECTORS	
	Chairman	Chris Brogdon
		6000 Laka Farrost Driva
		Atlanta, Georgia 30328
	Vice Chai	rman: <u>Edward E. Lano</u>
		6000 Lake Forrest Drive
		Atlanta. Georgia 30328
	Director:	Darrell C. Tucker
		6000 Lake Forrest Drive
	1	Atlanta Georgia 30328
	Director:	
В.	OFFICERS	
	President	Chris Brogdon
		6000 Lake Forrest Drive
		Atlanta, Georgia 30328
	Vice Pres	ident: Edward E. Lane
		6000 Lake Forrest Drive
		Atlanta, Georgia 30328
	Secretary	Philip M. Rees

Address: 6000 Lake Forrest Drive

Atlanta, Georgia 30328

DIVISION OF CORPORATION

95 JUL 24 PMI2: 01

Treasurer: Darrell C. Tucker
Address: 6000 take Forrest Drive
Atlanta, Quorgia 30328
NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Chris Brogdon, President (Typed or printed name and capacity of person signing application)

36 JUL 24 PHI2: 01

## Secretary of State Unsiness Information and Services Suite 315, West Cower 2 Martin Unliper King Ir. Ar. Allanta, Georgia 30334–1530

DOCKET NUMBER : 962040119
CONTROL NUMBER : 9622558
DATE INC/AUTH/FILED: 07/18/1996
JURISDICTION : GEORGIA
PRINT DATE : 07/22/1996
FORM NUMBER : 0211

CT CORPORATION SYSTEM KIMBERLY ZIRKLE 1201 FEACHTREE ST, NE ATLANTA, GA 30361

### CERTIFICATE OF EXISTENCE

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

### RIVIERA RETIREMENT, INC. A DOMESTIC PROFIT CORPORATION

was formed in the jurisdiction stated above or was authorized to transact business in Georgia on the above 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 abovenamed 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.



Jewis G. Massey

Lewis A. Massey Secretary of State