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SECREDARY OF STATE (P. 1570) (1) (1) (1) (ALLAHASSEE, FLORIOR) (1) (1) (1) (1) (1) (2)

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CORPDIRECT AGENTS, INC. (formerly CCRS) 103 N. MERIDIAN STREET, LOWER LEVEL TALLAHASSEE, FL 32301 222-1173 FILING COVER SHEET

Secretary of the secret FILING COVER SHEET ACCT. #FCA-14 CONTACT:  $\mathbf{ED}$ DATE: 05/31/05 **REF. #:** 0638.38596 CORP. NAME: PAVILION BOCA, LLC ( ) ARTICLES OF AMENDMENT ( ) ARTICLES OF DISSOLUTION ( ) ARTICLES OF INCORPORATION ( ) FICTITIOUS NAME ( ) TRADEMARK/SERVICE MARK ( ) ANNUAL REPORT ( ) LIMITED PARTNERSHIP ( XX ) FOREIGN QUALIFICATION ( ) LIMITED LIABILITY ( ) WITHDRAWAL ( ) MERGER ( ) REINSTATEMENT ( ) CERTIFICATE OF CANCELLATION ( ) OTHER: STATE FEES PREPAID WITH CHECK# 5/2796 FOR \$ 125.00 AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED: COST LIMIT: \$\_\_\_\_

#### PLEASE RETURN:

COPY
(

( ) CERTIFICATE OF STATUS

Examiner's Initials



#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	Pavilion Boca, LLC (Name of Foreign Limited Liability Company)
	North Carolina  Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
١.	May 25, 2005  (Date of Organization)  5. perpetual (Duration: Year limited flability company will cease to exist or "perpetual")
ś.	Upon filing  (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
<b>'</b> .	5605 Carnegie Boulevard, Suite 110, Charlotte, North Carolina 28209
	(Street Address of Principal Office)
١.	If limited liability company is a manager-managed company, check here 🗹
١.	The name and usual business addresses of the managing members or managers are as follows:
	Richard M. Davies, Manager
	5605 Camegie Boulevard, Suite 110, Charlotte, North Carolina 28209
he rai	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a slation of the certificate under oath of the translator must be submitted.)  Nature of business or purposes to be conducted or promoted in Florida: Owning and operating investment real estate.
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
	Jennifer L. Williams, Vice President, Physician Management Company  Typed or printed name of signee 1ts manager

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of	of the Limited Liability Company is:
Pavilion Boca, I	ис
2. The name	and the Florida street address of the registered agent and office are:
	National Corporate Research, Ltd., Inc.
	(Name)
	103 N. Meridian Street
	Florida Street Address (P.O. Box NOT ACCEPTABLE)
	Tallahassee FL 32301
	City/State/Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Rose Marie Co.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)



# NORTH CAROLINA Department of The Secretary of State

## CERTIFICATE OF EXISTENCE (Limited Liability Company)

I, ELAINE F. MARSHALL, Secretary of State of the State of North Carolina, do hereby certify that

#### PAVILION BOCA, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 25th day of May, 2005, with its period of duration being Perpetual.

I FURTHER certify that the said limited liability company's articles of organization are not suspended for failure to comply with the Revenue Act of the State of North Carolina; that the said limited liability company is not administratively dissolved for failure to comply with the provisions of the North Carolina Limited Liability Company Act; and that the said limited liability company has not filed articles of dissolution as of this date of this certificate.



IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at the City of Raleigh, this 27th day of May, 2005

Secretary of State

Elaine I. Marshall

Certification# 84754852-1 Reference# 7883484-ACH Page: 1 of I Verify this certificate online at www.secretary.state.nc.us/verification