Division of Corporations

Page 1 of 1



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Division of Corporations

Fax Number

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From: Maria Dauglash - Dirock

Account Name Account Number : 072720000036

: LOWNDES, DROSDICK, DOSTER, KANTOR & REED, P.A.

Phone

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LORIDA/FOREIGN LIMITED LIABILITY CO.

HCP PC1 Venice FL, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

Help

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. HCP PC1 Venice F	L, LLC			
	(Name of Foreign Limite	d Liability Company)		·
2 Delaware		3. 56-2310100	•	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FE	I number, if applicable)	, t
4 09/18/2002		5 Perpetual		
(Date of Org	ganization)	(Duration: Year exist or "perpetu	limited liability company al*)	will cease to
6. Upon filing	• ,	ar A 🖟		<u> </u>
(Si	Date first transacted business in se sections 608.501 & 608.502 F	Florida, if prior to regis .S. to determine penalty	tration.) (inbility)	*
7. 3760 Kilroy Airpo	rt Way, Suite 300	Something the		<u> </u>
Long Beach, Calif	iomia 90806	and the second		in t
	(Street Addre	sa of Principal Office)		
8. If limited liability con	npany is a manager-manage	ed company, check	here 🔲	SEI
9. The name and usual b	usiness addresses of the ma	anaging members or	managers are as follo	ows: ARET
HCP Partners, LP	, 3760 Kilroy Airport We	ay, Suite 300, Lor	ng Beach, California	a 9080ê 👼 🚶
	<u> </u>			77-57 171-57
				<u> </u>
	•			85 4
the jurisdiction under the law of	ificate of existence, no more than 9 f which it is organized. (A photoc ler oath of the translator must be st	opy is not acceptable. If		
11. Nature of business of	r purposes to be conducted	or promoted in Flo	riđa:	·
Owner/lessor of	commercial real prope	ríy		·
			-	
(In	gnature of a member or an accordance with section 608.408(3) affirmation under the penalties of p	, F.S., the execution of thi	s document constitutes	
		J. Henning	<u></u>	
	Typed or print	ed name of signe		

Fig. Market

WE WEST.

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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.

f the Limited Liability Company is: Venice FL, LLC	
A state of the sta	O7.HAR SECRET
(Name)	R 22
Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee PL 32301	M9:31
	Venice FL, LLC Ind the Florida street address of the registered agent and office are: Corporation Service Company (Name) 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE)

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.

Corporation Service Company

Greggory A. Pappas, Assistant Secretary

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

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HCP PC1 VENICE FL, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTIETH DAY OF MARCH, A.D. 2007.

AND I DO HERBBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

AND I DO HERBBY FURTHER CERTIFY THAT THE SAID "HCP PC1 VENICE FL, LLC" WAS FORMED ON THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2002. History Berry

070337919



AUTHENTICATION: 5521783

DATE: 03-20-07

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