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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Pavilion TK-Hillsboro, LLC		
	nited Liability Company)	
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are so liability company to transact business in Florida	• • •	
Please return all correspondence concerning this n	natter to the following:	
Meredith Robertson c/o Pa	avilion Development Cor	mpany
(Na	ame of Person)	-
Pavilion Development Cor	mpany	
(Fi	rm/Company)	2000 SEC
5605 Carnegie Blvd., Suite	e 110	JAN 22 FAHASSEE,
	(Address)	T P P
Charlotte, NC 28209		U: 5
(City/St	tate and Zip Code)	A
For further information concerning this matter, ple	ease call:	
Meredith Robertson	at (704) 557-9267	
(Name of Person)	(Area Code & Daytime Te	lephone Number)
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations	Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount: \$\sum{1}\$		0.00 Filing Fee, Certificate of Status & Certified Copy

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:

1. Pavilion TK-Hillsboro, LLC (Name of Foreign Limited Liability Company; must inc.)	clude "Limited Liability Company," "L.L.C.," or "LLC.")
	pose of transacting business in Florida and attach a copy of the writte ternate name. The alternate name must include "Limited Liability
_{2.} North Carolina	_{3.} 26-1688392
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)
_{4.} 1-10-2008	5. perpetual TASE TO THE TABLE
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
6.	ARY SSS
(Date first transacted business in F (See sections 608.501 & 608.502 F.)	S to determine penalty liability)
7. 5605 Carnegie Blvd., Ste 110	STATE 58
Charlotte, NC 28209	Din 0
(Street Addres.	ss of Principal Office)
8. If limited liability company is a manager-manage	ed company, check here
9. The name and usual business addresses of the ma	inaging members or managers are as follows:
Pavilion Management Company	
5605 Carnegie Blvd., Ste 110	
Charlotte, NC 28209	
10. Attached is an original certificate of existence, no more than 90 the jurisdiction under the law of which it is organized. (A photoco translation of the certificate under oath of the translator must be sub 11. Nature of business or purposes to be conducted or	bmitted.)
	or promoted in Florida.
development and management	·
- tour-	
(In accordance with section 608.408(3),	authorized representative of a member. F.S., the execution of this document constitutes erjury that the facts stated herein are true.)

Cynthia K. Have, vice President of Pavilson Management
Typed or printed name of signee Company, its 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 the Limited Liability Company is:			
Pavilior: TK-Hillsboro, LLC			
If name unavailable, the alternate name to be used in the state of Florida is:	SEC	2008	
2. The name and the Florida street address of the registered agent and office a	ECRETARY LLAHASSE	JAN 22	
National Corporate Research, Ltd. Inc.	m ch	U	A 1 1
(Name)	ETATE, LORIDA	h: 58	O
515 East Park Avenue	<i>></i>	ထ	
Ploride Street Address (P.O. Box NOT ACCEPTABLE)			
Tallahassee, FL 32301 FL			
City/State/Zip			

Having been named as registered ugent 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 verformance 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 Cole
Assistant Secretary

S 100.00 Filing Fee for Application

5 25.00 Designation of Registered Agent

S 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 TK-HILLSBORO, LLC

is a limited liability company duly formed under the laws of the State of North Carolina, having been formed on the 10th day of January, 2008, 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 17th day of January, 2008.

Elaine J. Marshall
Secretary of State

Certification# 87536712-1 Reference# 8987423- Page: 1 of 1 Verify this certificate online at www.secretary.state.ne.us/verification