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SECRETARY OF STATE



B. KOHR

APR - 3 2008

EXAMINER



ACCOUNT NO. : 072100000032 REFERENCE : 512003 7452534 AUTHORIZATION : ORDER DATE: April 2, 2008 ORDER TIME : 1:09 PM ORDER NO. : 512003-125 CUSTOMER NO: 7452534 FOREIGN FILINGS NAME: HCP OAK PARK, LLC XXXX QUALIFICATION (TYPE: LL) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Jeanine Reynolds -- EXT# 2933

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:

HCP Oak Pari	k, LLC ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(Name of Fore	ign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, consent of the manage Company," "L.L.C.,"	enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writters or managing members adopting the alternate name. The alternate name must include "Limited Liability "LLC.")	ten
2. Delaware	3.	
(Jurisdiction under to company is organize	the law of which foreign limited liability (FEI number, if applicable)	
4. April 1	5. Perpetual (Duration: Year limited liability company will cease to	
(Date	(Duration: Year limited liability company will cease to exist or "perpetual")	
5.	70	
7	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	η
0.500 7511	3 to 200 to 100	
3760 Kilroy 2	Aiport Way, Suite 300, Long Beach, CA 90806 (Street Address of Principal Office)	
	ity company is a manager-managed company, check here	
	usual business addresses of the managing members or managers are as follows:	
FAEC HOIGH	ngs (EP), LLC, a Delaware limited liability company	
3760 Kilroy A	Aiport Way, Suite 300, Long Beach, CA 90806	
he jurisdiction under th	inal certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records ne law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a cate under oath of the translator must be submitted.)	in
1. Nature of busin	ness or purposes to be conducted or promoted in Florida: Ownership, operation	
	nent of real estate.	
	Brief Hay	
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.F., the execution of this document constitutes	
	an affirmation under the penalties of penutry that the facts stated herein are true.)	^
	Brian J. Maas, Senior Vice President of FAEC Holdings (EP) LL	C
	Typed or printed name of signee 1+8 sole member	

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:

HCP Oak Park, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and 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)	
Tallahassee FL 32301	
City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated limit liability company at the place designated in this certificate, I hereby accept the appointment as reagent and agree to act in this capacity. I further agree to comply with the provisions of all statute relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes. Corporation Service Company Jeanine Reynolds Signature) Signature	egistered es
\$ 100.00 Filing Fee for Application	
\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)	
\$ 5.00 Certificate of Status (optional)	

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "HCP OAK PARK, 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 THIRD DAY OF APRIL, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "HCP OAK PARK, LLC" WAS FORMED ON THE SECOND DAY OF APRIL, A.D. 2008.

4528145 8300

080387054

Warriet Smith Windsor, Secretary of State

namet simar windson, decretary or

AUTHENTICATION: 6497613

DATE: 04-03-08

You may verify this certificate online at corp.delaware.gov/authver.shtml