Division of Corporations Electronic Filing Cover Sheet

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(((H120002996183)))



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Division of Corporations

Fax Number : (850) 617-6383

From:

: BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE Account Name

Account Number: 072731001155 Phone : (813)253-2020 Fax Number : (813)251-6711

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Foreign Limited Liability Company HC-1940 Town Park Boulevard, LLC

Certificate of Status 1 Certified Copy 0 Page Count 03 Estimated Charge \$130.00

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12/21/2012

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

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:	
1. HC-1940 Town Park Boulevard, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "L.L.C.")	
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized)  3. 80-0868951 (FBI number, if applicable)	
4, 11/26/2012  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")	
6. n/a	
(Date first fransacted business in Florida, If prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
7. 4211 W. Boy Scout Boulevard, Ste. 500	
(Date first fransacted business in FlorIds, If prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)  7. 4211 W. Boy Scout Boulevard, Ste. 500  Tampa, FL 33607	
(Street Address of Principal Office)	
(Street Address of Principal Office)  8. If limited liability company is a manager-managed company, check here	
9. The name and usual business addresses of the managing members or managers are as follows:	
Carter/Validus Operating Partnership, LP, a Delaware limited partnership	
4211 W. Boy Scout Boulevard, Ste. 500	
Tampa, FL 33607	
10. Attached is an original certificate of existence, no more than 90 days old, duty authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	
11. Nature of business or purposes to be conducted or promoted in Florida: manage investments	
made by related companies	
* Sh	
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 penalities of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellony as provided for in s.817.155, F.S.)	
Lisa A. Drummond, Authorized Representative	
Typed or printed name of signee	

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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.

1. The name of the Limited Liability Company is:  HC-1940 Town Park Boulevard, LLC	•
If unavailable, the alternate to be used in the state of Florida is:	
The name and the Florida street address of the registered agent and office are:  Lisa A. Drummond	ZIIZ DEC
(Name)	\$55 2 F
4211 W. Boy Scout Boulevard, Ste. 500 Florida Street Address (P.O. Box NOT ACCEPTABLE)	M 8: 44 OF STATE
Tampa <sub>PL</sub> 33607	. 12
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.

\$ 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)

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## Delaware

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## The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "HC-1940 TOWN PARK BOULEVARD, 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 EIGHTEENTH DAY OF DECEMBER, A.D.

2012.

5246700 8300

DATE: 12-18-12

Jeffrey W. Bullock, Secretary of State CATION: 0079648

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