Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number: 113615003626

Phone Fax Number : (407)650-1000

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

Email Address: 21

Foreign Limited Liability Company CHP Chula Vista CA MOB Owner, LLC

Certificate of Status	0
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FEB - 4 2014

A. LURT

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Corporate Filing Menu

Help

14072648251 From: Elleen Soto

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED I IABILITY COMPANY (IV) TRANSACT REININESS. IN THE STATE OF ELORIDA.

(Name of Fore	eign Limited Liability Company	; must include "Limit	ed Liability Company," "L.L.C.,	" or "LLC.")	
If name unavailable, enter a Liability Company," "L.L.C	alternate name adopted for the pr	urpose of transacting	business in Florida. The alternat	e name must include "L	imited
Delaware		₃ 80	-0964060		
(Jurisdiction under the law company is organized)	w of which foreign limited liabil		(FEI number, if app	olicable)	
November 2	22, 2013				
	(Date first transacted (See sections 605,0904 &	husiness in Florida, it 2 605.0905, F.S. to d	prior to registration.) termine penalty liability)		
_{s.} 450 S. Orar	nge Avenue, Orl	ando, FL 3	2801		
	(Str	ect Address of Princip	oal Office)		
, PO Box 492	0, Orlando, FL	32802			****
-				A S	-
		(Mailing Addres	<u>s)</u>	m _o	- [
7. The name, title or	capacity and address of	f the person(s) w	ho has/have authority to	manage is/are	
	• •	•	enue, Orlando, F	37 B	Land 2
Holly J. Greer	, 450 S. Orange	Avenue,	Orlando, FL 328	01	
Joseph T. Joh	nson, 450 S. O	range Ave	nue, Orlando, Fl	_ 32801	
aving custody of rec	ords in the jurisdiction i	inder the law of	in 90 days old, duly authors which it is organized. (A	A photocopy is not	t
		House	eason		
n accordance with section 605		ture of an author	rized person Mirmation under the penalties of perj	jury that the facts stated he	cion are true
			nstitutes a third degree felony as pro-		

Typed or printed name of signee

Amy J. Patterson

414000026236-3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

 The name of the Limited Liability Compa 	ny is:
---	--------

CHP Chula Vista CA MOB Owner, LLC

If unavailable, the alternate to be used in the state of Florida is:

2. The name and the Florida street address of the registered agent and office are:

Amy J. Patte	rson	N	2014	
	(Name)	AH.	13.1	-
450 S. Orange Avenue		TAR Y ASSI). Già	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	E O	P	m
Orlando	FL 32801	FLORI	6 5	
	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 605, Florida Statutes.

(S(gnature)

\$ 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

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHP CHULA VISTA CA MOB OWNER, 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 TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHP CHOCK VISTA CA MOB OWNER, LLC" WAS FORMED ON THE TWENTY-SECOND CHAY NOVEMBER, A.D. 2013.

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

5437348

131341260

AUTHENTICATION: 0924828

DATE: 11-25-13