14072648251 From: Eileen Soto

Page 1 of 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Foreign Limited Liability Company CHP Oklahoma City OK Rehab Owner, LLC

Certificate of Status	0
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Electronic Filing Menu

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUE FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORING CHP Oklahoma City OK Rehab Owner, 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. The alternate Liability Company," "L.L.C." or "LLC.")	name must include "Limited
_{2.} Delaware _{3.} 47-1023659	
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicompany is organized)	cable)
4. upon qualification	
(Date first transacted business in Florida, if prior to registration.) (See sections 605,0904 & 605,0905, F.S. to determine penalty liability)	
5. 450 S. Orange Avenue, Orlando, FL 32801	
	SE SE
(Street Address of Principal Office)	
6. PO Box 4920, Orlando, FL 32802-4920	
	3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Mailing Address)	<u> </u>
7. The name, title or capacity and address of the person(s) who has/have authority to n	nanage is/are:
Holly J. Greer, 450 S. Orange Avenue, Orlando, FL 3280	
Joseph T. Johnson, 450 S. Orange Avenue, Orlando, FL	32801, Manager
Stephen H. Mauldin 450 S. Orange Avenue, Orlando, FL	32801, manager
8. Attached is an original certificate of existence, no more than 90 days old, duly auther having custody of records in the jurisdiction under the law of which it is organized. (A acceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	photocopy is not
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution in this document constitutes an all limation under the penalties of perjuit am aware that any fulse inflormation submitted in a document to the Department of State constitutes a third degree felony as provi	ry that the facts stated herein are true. I ded for in s.817.155, F.S.)
Amv J. Patterson	

Typed or printed name of signee

HH0002062813

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.

	f the Limited Liability ahoma City (Company is: OK Rehab Owner, LLC		pagagan bading	
If unavailable,	the alternate to be used	d in the state of Florida is:			
2. The name ar	nd the Florida street ad	idress of the registered agent and office are:	÷		
	Amy J. Patte	erson	25 17		
		(Name)	n-iri ili	SEP	٠,
450 S. Orange Avenue			SEP 10	!	
	Florida St	reet Address (P.O. Hox NOT ACCEPTABLE)	***	E	
	Orlando,	FL 32801 City/State/Zip	_ 22	8: 07	, , ,,
		City/state/2.1p	E i	~	

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.

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

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DACE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHP OKLAHOMA CITY OK REHAB 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 THIRD DAY OF SEPTEMBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHP ORLAHOMA CITY OK REHAB OWNER, LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MAY, A.D. 2014.

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

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You may verify this certificate onling

Jeffrey W. Builbock, Secretary of State
AUTHENTICATION: 1667683

DATE: 09-03-14