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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 : (407)650-1000

Fax Number : (407)540-2699

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

> SODE cal-com

Foreign Limited Liability Company CHP Presbyterian-Charlotte NC MOB Owner, LLC

> Certificate of Status 0 0 Certified Copy Page Count 04 \$125.00 Estimated Charge

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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 SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CHP Presbyterian-Charlotte NC MOB Owner		
(Name of Foreign Limited Liability Company; must include "Lir	nited Liability Company," "L.L.C.," or "LLC.")	•
(If name unavailable, enter alternate name adopted for the purpose of transactin Liability Company," "L.L.C," or "LLC,")	ng business in Florida. The alternate name must include "Uin	_ nitcd
	pplied for	
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)	-
upon qualification		
(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. to	, if prior to registration.) determine penalty liability)	<b>-</b>
<sub>5.</sub> 450 S. Orange Avenue	=======================================	W ≤20
Orlando, FL 32801	OCT TO THE PROPERTY OF THE PRO	- <del>1</del>
(Street Address of Prin	cipal Office)	- 850 - 747
6. PO Box 4920		_ ^; ; c
Orlando, FL 32802	بې	3.0°
(Mailing Addi	ress)	- <del>5</del> F
7. The name, title or capacity and address of the person(s)	who has/have authority to manage is/are:	·
Stephen H. Mauldin, 450 S. Orange Av	venue, Orlando, FL 32801, Nan	nager
Holly J. Greer, 450 S. Orange Avenue,		
		•
Joseph T. Johnson, 450 S. Orange Av	<u>′enue, Orlando, FL 32801 , / No</u>	inager
8. Attached is an original certificate of existence, no more that having custody of records in the jurisdiction under the law of acceptable. If the certificate is in a foreign language, a transmust be submitted)  Signature of an authorized with section 605,0203, F.S., the execution of this document constitutes are as aware that any false information submitted in a document to the Department of State	of which it is organized. (A photocopy is not lation of the certificate under oath of the trans corized person affirmation under the penalties of perjury that the facts stated herei	slator
Amy J. Patterson		
Typed or printed name	e of signee	

### 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.

	of the Limited Liability ( esbyterian-Cha	Company is: arlotte NC MOB Owner, LL	C
If unavailable,	, the alternate to be used	in the state of Florida is:	
2. The name a	and the Florida street add	lress of the registered agent and office are:	
	Amy J. Patterson		25078 77,007
		(Name)	·
450 S. Orange Avenue		22 EX	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			
	Orlando,	FL 32801	9: 57
		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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)

# Delaware

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#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHP PRESBYTERIAN-CHARLOTTE NC 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 EIGHTH DAY OF OCTOBER, A.D. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHP PRESBYTERIAN-CHARLOTTE NC MOD OWNER, LLC" WAS FORMED ON THE SEVENTH DAY OF OCTOBER, A.D. 2014.

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

5616907 8300

141266315

DATE: 10-08-14

Jeffrey W. Bullock, Secretary of St. AUTHENTY CATION: 1762612