

MI4000008547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

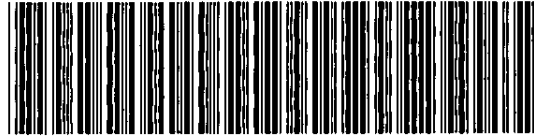
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800265741478

RECEIVED  
OFFICE OF STATE  
RECORDS & INFORMATION  
2014 NOV 26 PM 13:56  
1000 BANKER BOULEVARD  
SUITE 1000  
TALLAHASSEE, FL 32309

FILED  
14 NOV 26 PM 2:25  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DEC - 2 2014

T. BROWN

~~11/24/14~~



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 393715 7862578

AUTHORIZATION

COST LIMIT : \$ 125.00

ORDER DATE : November 26, 2014

ORDER TIME : 10:13 AM

ORDER NO. : 393715-010

CUSTOMER NO: 7862578

FOREIGN FILINGS

NAME: GAHC3 MOUNT DORA FL MOB, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 1, 2014

CSC  
COURTNEY WILLIAMS  
TALLAHASSEE, FL

**RESUBMIT**  
Please give original  
submission date as file date.

SUBJECT: GAHC3 MOUNT DORA FL MOB, LLC  
Ref. Number: W14000071244

We have received your document for GAHC3 MOUNT DORA FL MOB, LLC and the authorization to debit your account in the amount of \$125.00. However, the document has not been filed and is being returned for the following:

Pursuant to s.605.0902(1)(e), Florida Statutes, the document must contain the name, title or capacity and address of at least one person who has the authority to manage the foreign limited liability company.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown  
Regulatory Specialist II

Letter Number: 014A00025174

RECEIVED  
DEPARTMENT OF STATE  
14 DEC - 1 PM 4:35

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

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A  
FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:*

1. GAHC3 Mount Dora FL MOB, 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 name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. \_\_\_\_\_

(FEI number, if applicable)

4. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration.)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. c/o Griffin-American Healthcare REIT III Holdings, LP

18191 Von Karman Ave., Suite 300, Irvine, CA 92612

(Street Address of Principal Office)

6. 18191 Von Karman Ave., Suite 300,

Irvine, CA 92612

(Mailing Address)

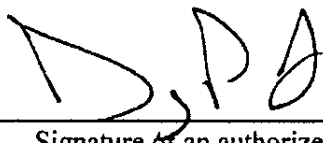
7. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

GAHC3 Mount Olympia MOB Portfolio, LLC, Sole Member

18191 Von Karman Ave., Suite 300

Irvine, CA 92612

8. Attached is an original certificate of existence, no more than 90 days old, duly 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)

  
\_\_\_\_\_  
Signature of an authorized person

(In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties 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 felony as provided for in s.817.155, F.S.)

By: GAHC3 Mount Olympia MOB Portfolio, LLC, its Sole Member

By: Griffin-American Healthcare REIT III Holdings, LP, its Sole Member

By: Griffin-American Healthcare REIT III, Inc., its General Partner

By: Danny Proskey, President, Chief Operating Officer

**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.

1. The name of the Limited Liability Company is:

GAHC3 Mount Dora FL MOB, 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:

Corporation Service Company

(Name)

1201 Hays Street

Florida Street Address (P.O. Box NOT ACCEPTABLE)

Tallahassee

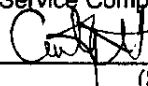
FL 32301

City/State/Zip

*Having been named as registered agent and to accept service of process for the above stated 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.*

Corporation Service Company

By:



(Signature)

**Courtney Williams**  
**Asst. Vice President**

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

FILED  
14 NOV 26 PM 2:25  
TALLAHASSEE, FLORIDA  
CLERK OF CIRCUIT COURT

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GAHC3 MOUNT DORA FL MOB, 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. 2014.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAHC3 MOUNT DORA FL MOB, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF NOVEMBER, A.D. 2014.

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



5646515 8300

141456214

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

  
Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 1899473

DATE: 11-25-14