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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 710446 4301771

AUTHORIZATION :

COST LIMIT : \$\int 125.00

ORDER DATE: July 16, 2015

ORDER TIME : 3:27 PM

ORDER NO. : 710446-085

CUSTOMER NO: 4301771

FOREIGN FILINGS

NAME: CSH TARMARAC 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:

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

IN COMPILANCE 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:

. CSH Tamarac LLC	OSINEES IN THIS STATE OF TEORIDA.	
(Name of For	reign Limited Liability Company; must include "Limited Lia	ability Company," "L.L.C.," or "LLC.")
Liability Company," "L.L.C	alternate name adopted for the purpose of transacting busine ," or "LLC.")	ess in Florida. The alternate name must include "Limited
2. Delaware	of which foreign limited liability	(FIEI number, if applicable)
(Jurisdiction under the law company is organized)	v of which foreign limited hability	(FEI number, if applicable)
4	(Data first (renconted business in Florida, if print to	o registration
	(Date first transacted business in Florida, if prior to (See sections 605.0904 & 605.0905, F.S. to determine	ne penalty liability)
5. <u>c/o HCP, Inc. 1920 M</u>		
Irvine, California 926		
	(Street Address of Principal Office)	~~
6. c/o HCP, Inc. 1920 Ma	ain Street, Suite 1200	3
Irvine, California 926	14	
	(Mailing Address)	
7. Name and street addre	ss of Florida registered agent: (P.O. Box NOT accep	1
Name:	Corporation Service Company	table)
Office Address:	1201 Hays Street	24 200
	Tallahassee	Florida 22201
	(City)	(Zip code)
Registered agent's accep		
	egistered agent and to accept service of process for th accept the appointment as registered agent and agre	he above stated corporation at the place designated in
		ance of my duties, and I am familiar with and accept
the obligations of my pos	ition as registered agent.	Courtney Williams
	Corporation Service Company By:	Asst. Vice President
	(Registered agent's/signature)	ASSI. VICE 1 163100
8. The name, title or can	acity and address of the person(s) who has/have author	rity to manage is/are:
•	s sole member	, to manage is are
c/o HCP, Inc. 1920 Main	Street. Suite 1200	
Irvine, California 92614		
		
	-	cated by the official having custody of records in the gn language, a translation of the certificate under oath
	/s/ Kendall K. Young	
	Signature of an authorized perso	n
	true. I am aware that any false information submitted i	stitutes an affirmation under the penalties of perjury that in a document to the Department of State constitutes a third
<u> </u>	Kendall K. Young, Executive Vice President	

Typed or printed name of signee

Delaware

PAGE

The First State

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

DELAWARE, DO HEREBY CERTIFY "CSH TAMARAC 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 TENTH DAY OF JULY, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CSH TAMARAC LLC" WAS FORMED ON THE NINETEENTH DAY OF MARCH, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

4319921 8300

151036905

AUTHENTY CATION: 2546134

DATE: 07-10-15

You may verify this certificate online at corp.delaware.gov/authver.shtml