

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H150002069703)))



H150002069703ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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 : (407)540-7522

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

eileen-soto a Cnl. com

Foreign Limited Liability Company CHP Columbia MO Plaza 4 MOB Owner, LI

Certificate of Status	0	
Certified Copy	0 03 \$125.00	
Page Count		
Estimated Charge		

ectronic Filing Menu

Corporate Filing Menu

Help

3 MASON

AUG 28 2015

75000206970 3 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 BU	USINESS IN THE STATE OF FLORIDA:			
	aza 4 MOB Owner, LLC			
(Name of For	eign Limited Liability Company; must include "L	imited Liability Company," "L.I	C.," or "LLC.")	,
(If name unavailable, enter a Liability Company," "L.L.C.	Itemate name adopted for the purpose of transacti	ng business in Florida. The alter	nate name must	include "Limited
2. Delaware	•	3973720	· ·	
	of which foreign limited liability	(FBI number, If ap	plicable)	
4. upon qualification		_		
	(Date first transacted business in Florida (See sections 605.0904 & 605.0905, F.S. to	if prior to registration.) determine penalty liability)		
5, 450 S. Orange Avenue				
Orlando, FL 32801			•	
	(Street Address of Principal Off	cc)		
6. PO Box 4920				
Orlando, FL 32802-492	20		MIAR MASS	
	(Mailing Address)			المحتمدة
7. Name and street address	ss of Florida registered agent: (P.O. Box NC	<u>)T_acceptable)</u>	F. D	> [
Name:	Amy J. Patterson		OF STATE	, •
	450 S. Orange Avenue		TE A	3
Office Address:	Orlando	27001		
	(City)	, Florida 32801 (Zip o	ode\	
Registered agent's accep	tance:		•	
Having been tramed as re- this application. I hereby	gistered agent and to accept service of proce accept the appointment as registered agent	iss for the above stated corpus	pration at the p	riace designated in agree to commis
with the provisions of all s	statutes relative to the proper and complete	performance of my duties, a	nd I am famili	ar with and accept
the obligations of my post	ition as registered agent			
	(Registered agent's	<u>%</u>	·	
	- - ·	•		
	ecity and address of the person(s) who has/ha	·		
	ager, 450 S. Orange Avenue, Orlando, FL 32	2801		_
Holly J. Greer, Manager,	450 S. Orange Avenue, Orlando, FL 32801			
Kevin R. Maddron, Manag	ger, 450 S. Orange Avenue, Orlando, FL 328	01		
9. Attached is a certificate jurisdiction under the law of the translator must be su	of existence, no more than 90 days old, duly of which it is organized. (If the certificate is it ibmitted)	n a foreign language, a transle	naving custody ation of the cen	of records in the tificate under oath
This document is executed submitted in a document to	in accordance with section 605.0203 (1) (b), the Department of State constitutes a third d	Florida Statutes, I am aware t egree felony as provided for it	hat any false in n s.817.155, P.S	iformation S.

Typed or printed name of signee

Amy J. Patterson

Delaware

PAGE '

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHP COLUMBIA MO PLAZA 4 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 SEVENTEENTH DAY OF JUNE, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHP COLUMBIA MO PLAZA 4 MOB OWNER, LLC" WAS FORMED ON THE SIXTEENTH DAY OF JUNE, A.D. 2015.

5767609 8300

150928664

AUTHENTY CATION: 2474454

DATE: 06-17-15

You way verify this certificate online at corp. delaware.gov/authour.shtml