## M17000000612

(Re	equestor's Name)				
(Ac	ldress)				
(Ac	ldress)				
(Ci	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	usiness Entity Nar	ne)			
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to	Filing Officer:				

Office Use Only



900294079149

Survey of the Servey of the Se

**S Warren** JAN 2 4 2017

CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 474026 8002022

AUTHORIZATION :

COST LIMIT : \$ 125\00

ORDER DATE: January 20, 2017

ORDER TIME : 3:58 PM

ORDER NO. : 474026-005

CUSTOMER NO: 8002022

#### FOREIGN FILINGS

NAME: CCRC - FREEDOM FAIRWAYS GOLF

COURSE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER:

#### COVER LETTER

TO:		ation Section n of Corporations	3					
SUВЛ		RC - Freedom Fai	rways Golf Course, LLC					
оодо,			Name of I	Limited Liability C	Company			
The en	nclosed "A nce, and cl	pplication by Fore neck are submitted	ign Limited Liability Comp to register the above refere	oany for Authoriza enced foreign limit	tion to Tra ed liability	nsact Business in Florida," C company to transact busines	Certificate of ss in Florida	
Please	return all	correspondence co	oncerning this matter to the	following:				
		Jamie Curry						
			N	ame of Person				
		CCRC - Freedor	n Fairways Golf Course, Ll	.c				
Firm/Company								
		111 Westwood I	Place, Suite 400					
				Address				
		Brentwood, TN	37027					
			City/S	tate and Zip Code				
		jcurry l@brookda	le.com					
			E-mail address: (to be used	d for future annual	report not	ification)		
For fu	rther infor	mation concerning	this matter, please call:					
	Jamie (	Curry		615 at (	564-800	00		
		Name of	f Contact Person	Area Code	Day	time Telephone Number		
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		of Corporations ion Section uilding cutive Center Circle			
Enclo		eck for the followi 5.00 Filing Fec	ing amount:  □ \$130.00 Filing Fee &  Certificate of Status	☐ \$155.00 Filir Certified Copy	ig Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy		

### 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 BY INFINESS IN THE STATE OF FLORIDA:

1. CCRC - Freedom Fairw (Name of Fore	vays Golf Course, LLC	2				
(Name of Forc	ign Limited Liability Co	mpany; must includ	de "Limited Lia	bility Company," "L.	L.C.," or "LLC.")	
(If name unavailable, enter al Liability Company," "L.L.C,"	ternate name adopted for "or "LLC.")	r the purpose of tran	nsacting busines	s in Florida. The alte	mate name must includ	le "Limited
2. Delaware		3.				
(Jurisdiction under the law company is organized)	of which foreign limited	liability		(FEI number, if ap	oplicable)	
4. March 31, 2016						
	(Date first transs (See sections 605.0	acted business in Fl 0904 & 605.0905, F	orida, if prior to F.S. to determine	o registration.) e penalty liability)		
5. 111 Westwood Place,	Suite 400		<del></del>			out W <sup>m</sup> dd
Brentwood, TN 37027						
	,	Address of Principa	al Office)		苏军 83	-
6. 111 Westwood Place, S	Suite 400					M
Brentwood, TN 37027					A II: 12 OF STATE	ED
		(Mailing Address	s)	·····	II: 12 STATE STATE DRID	
7. Name and street address	ss of Florida registered	l agent: (P.O. Box	x <u>NOT</u> accept	iable)	IDA	•
Name:	Corporation Service	Company		_		
Office Address:	1201 Hays Street			_		
	Tallahassee			, Florida 32301 (Zip		
		(City)		(Zip	code)	
Registered agent's accep Having been named as re designated in this applica to complywith the provisi accept the obligations of	egistered agent and to ation, I hereby accept t ons of all statutes rela	the appointment of ative to the proper	as registered a	igent and agree to i	act in this capacity. ny duties, and I am J	I further agree familiar with and
		This is			Courtney Wil	liams
		(Registered ag	gent's signature)		<del>-Asst.</del> Vicio Pre	sident
8. The name, title or capa	acity and address of the	e person(s) who h	as/have author	rity to manage is/ar	e:	
CCRC OpCo - Sun City (	Center, LLC, Managing	g Member				
111 Westwood Place, Sui	te 400, Brentwood, TN	N 37027				
9. Attached is a certificate jurisdiction under the law of the translator must be s	of which it is organize		ate is in a forei	gn language, a trans		
This document is executed submitted in a document to	d in accordance with se	ection 605.0203 (1	l) (b), Florida hird degree fel	Statutes. I am awar- ony as provided for	e that any false inform in s.817.155, F.S.	mation
	H. Todd Kaestner		<i>a</i>	, ,	-,	

Typed or printed name of signee

Page 1

# Delaware The First State

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

DELAWARE, DO HEREBY CERTIFY "CCRC - FREEDOM FAIRWAYS GOLF COURSE,

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 TWENTIETH DAY OF JANUARY, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CCRC - FREEDOM FAIRWAYS GOLF COURSE, LLC" WAS FORMED ON THE EIGHTH DAY OF MARCH,

A.D. 2016.

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

Authentication: 201906228

Date: 01-20-17

5983437 8300 SR# 20170359531