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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 763594 7775081 AUTHORIZATION : COST LIMIT ORDER DATE: August 11, 2017 ORDER TIME : 9:42 AM ORDER NO. : 763594-005 CUSTOMER NO: 7775081 FOREIGN FILINGS NAME: W TCG MELBOURNE CAMPUS, LLC XXXX QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER:

CONTACT PERSON: Melissa Zender -- EXT# 62956

TO:

## COVER LETTER

TO:	Registration Section Division of Corporations					
CHR H	W TCG Melbourne Campus, LLC					
SUBJI	ECT:Nam	ne of Limited Liability Company				
		Company for Authorization to Transact Business in Florida," Ce referenced foreign limited liability company to transact business				
Please	e return all correspondence concerning this matter to	to the following:				
	Aurora Kurth					
		Name of Person				
	Welltower Inc.	Welltower Inc.				
Firm/Company						
	4500 Dorr St.					
Address						
	Toledo, Ohio 43615					
	C	City/State and Zip Code				
	akurth@welltower.com					
	E-mail address: (to be	be used for future annual report notification)				
For fu	orther information concerning this matter, please cal	dl:				
	Aurora Kurth	419 247-5724 at ( )				
	Name of Contact Person	Area Code Daytime Telephone Number	<b>4</b>			
	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	FILED			
Enclos	sed is a check for the following amount:  \$\Boxed\$ \$\sum \\$125.00\$ Filing Fee  Certificate of Status		jicate &			

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

IN COMPLIANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

COMPANYTO TRANSACT BU	NINESS INTHE STATE OF FLORIDA:		
1. W TCG Melbourne Car			
(Name of Foreign	Limited Liability Company, must include "Limited	Liability Company," "L.L.C.," or "LLC	l.")
(If name unavailable, enter alternate n	ame adopted for the purpose of transacting business in Florid	da. The alternate name must include "Limited	Liability Company," "I. I. C," or "I.I.C.")
2. Delaware		3.	
(Jurisdiction under the law of w	hich foreign limited liability company is organized)	(Filt n	umber, if applicable)
4			
	(Date first transacted business in Florida, if prior to re (See sections 605 0904 & 605 0905, F.S. to determine		
5. 4500 Dorr Street		6. 4500 Dorr Street	
(Street Address of Principal Office)		(Mailing / Toledo, Ohio 43615	Address)
Toledo, Ohio 43615	<u>.                                    </u>	Toledo, Onto 43613	
		-	
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT acceptable)	
Name:	Corporation Service Company		
Office Address:	1201 Hays Street		
	Tallahassee	, Florida 32301	
to comply with the provisi	tion, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent.  Corporation Service Company  By:  (Registered agent's signal of the proper agent)	ind complete performance of n	my duties, and I am familiar with  Melissa Zender
	(Negatered agent x vi	grantze)	Asst. Vice President
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who has Name and Address:	/have authority to manage is/are Title or Capacity:	:: Name and Address:
	<del></del>	Title of Capacity.	A Sy =
Member	Welltower TCG RIDEA Tenant, LLC	<del></del>	- FS - 1
	4500 Dorr Street Toledo, Ohio 43615		
			To the second se
			20.0
(Use attachments if neces	sary)		
	of existence, no more than 90 days old, d of which it is organized. (If the certificate ubmitted)		
10. This document is exec submitted in a document to	uted in accordance with section 605.0203 o the Department of State constitutes a thir	(1) (b), Florida Statutes, I am avid degree felony as provided for	ware that any false information in s.817.155, F.S.

Typed or printed name of signee

Tracy W. Carte, Authorized Person

Signature of an authorized person



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "W TCG MELBOURNE CAMPUS, 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 ELEVENTH DAY OF AUGUST, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "W TCG MELBOURNE CAMPUS, LLC" WAS FORMED ON THE NINTH DAY OF AUGUST, A.D. 2017.

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

Authentication: 203042265

Date: 08-11-17

6506594 8300

SR# 20175679633