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(Requ	estor's Name)	<u>.,</u>
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Office Use Only



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19 JAN 18 PH 4: 24.

O SIMINONS

JAN 222019

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT	NO.	:	I20000000199

REFERENCE : 595096 5020855

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE: January 18, 2019

ORDER TIME : 3:03 PM

ORDER NO. : 595096-005

CUSTOMER NO: 5020855

FOREIGN FILINGS

NAME: NHI-REIT OF NEXT HOUSE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Emily Croft -- EXT# 62925

EXAMINER:

COVER LETTER

Registration Section Division of Corporations

TO:

	<u>.</u>	Name of I	imited Liability Company	<i>!</i>	
enclosed " stence, and	Application by For check are submitte	eign Limited Liability Comp d to register the above refere	any for Authorization to T need foreign limited liabil	ransact Business in Florida," Ce ity company to transact business	ertificate in Flori
ise return a	ili correspondence o	oncerning this matter to the	following:		
	Rebekah Simor	ıs			
		Ne	ime of Person		
	c/o The Nathan	san Group PLLC			
		Fi	rn/Company		
	600 University	Street, Suite 2000			
			Address		
	Scattle, WA 98	101			
		. City/S	ate and Zip Code		
	rebekahs@natha	•			
		ਲ-mail address: (to be used	for future annual report r	notification)	
further inf	formation concerning	g this matter, please call:			
Rebo	ekah Simons		206 623-i		
	Name o	of Contact Person	Area Code D	aytime Telephone Number	
Divis Regis P.O.	LING ADDRESS: sion of Corporation stration Section Box 6327 shassee, FL 32314		Divisio Registr Clifton 2661 E	ET ADDRESS: on of Corporations ration Section Building Executive Center Circle assee, FL 32301	
	check for the follow 25,00 Filing Fee	ving amount; [7] \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy	∠ □ \$160.00 Filing Fee, Certified Copy	ificate

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

IN COMPLIANCE WITH SECTION 605 0:02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. NHI-REIT of Next Ho (Name of Foreign	USC, LLC Limited Liability Company, must include "Limited	Liability Company," "L.L.C.," or "LUC.")		
(If name imposibility enter alternate of	aine adopted for the purpose of transacting business in Florid	ta. The alternate name must include "Limited Lis	bility Company, " "L.L.C." or "LLC ")	
	The soobers 12 are backets or more arms among the second	3. 46-4092682	,,	
2. Delaware (Jurisdiction under the law of wi	nich foreign limited hability company is organized)		per, (fapphicable)	
a 1/31/2019				
4. 113112017	(Date first transacted busatess at Florida, if prior to re (See sections 605 0904 & 605,0905, F.S. to determine	gistration)		
5 222 Robert Rose Dr.	(See section to 3.0504 & basicosos, 1.2. to determine	6. 222 Robert Rose Dr.		
(Street Address of I	Principal Office)	O. [Nailing Address)		
Murfreesboro, TN 37129 Murfreesboro, TN 37129				
			رْنَ	
7. Name and street addres	ss of Florida registered agent: (P,O. Box	NOT acceptable)		
	NRAI Services, Inc.	-	شد	
Name:				
Office Address:	1200 South Pine Island Road	,		
	Plantation	, Florida 33324 (Zip c∞	ئے۔ دن دن	
	(City)	(Zip cox	(3D)	
designated in this applicate to comply with the provis	egistered a sent and to accept service of proton, I hereby accept the appointment as ions of all statutes relative to the proper as of my position as registered agent. NRAI Services Inc. By: The Registered agent's in	registered agent and ogree to act	in this capacity. I further agree	
D 773	- its and address of the passaget who has	Though outhority to manage island:		
Title or Capacity:	acity and address of the person(s) who has <u>Name and Address:</u>	Title or Capacity:	Name and Address:	
Managing Member	National Health Investors, Inc.			
	222 Robert Rose Drive Murfreesboro, TN 37129			
	·	•		
(Use attachments if neces	ssary) '			
jurisdiction under the law of the translator must be s 10. This document is executed the second sec	outed in accordance with section 605.0203 of the Department of State constitutes a thin	e is in a foreign language, a transla (1) (b), Florida Statutes. I am awa	tion of the certificate under oath re that any false information	
	,			
	Rebekah Simons, Authorized Represent	tative		

Typed or printed name of signee

Page 1



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

DELAWARE, DO HEREBY CERTIFY "NHI-REIT OF NEXT HOUSE, 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 EIGHTEENTH DAY OF JANUARY, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NHI-REIT OF NEXT HOUSE, LLC" WAS FORMED ON THE TWELFTH DAY OF NOVEMBER, A.D. 2013.

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

at corp delaware gov/au

Authentication: 202108068

Date: 01-18-19

5430862 8300 SR# 20190370727