m98000001499



ACCOUNT NO. : 072100000032

REFERENCE :

0<u>596</u>94

AUTHORIZATION

COST LIMIT :

ORDER DATE: December 10, 1998

ORDER TIME :

10:06 AM

ORDER NO. : 059694-890

CUSTOMER NO:

4303829

CUSTOMER: Barbara B. Erwin, Legal Asst 500002712725--2

Shaw, Pittman, Potts & 2300 N Street, N.w.

Washington, DC 20037

FOREIGN FILINGS

NAME: CCRC AMELIA ISLAND LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

Verifyer

U daler

Name

Availability Cocument Examiner

Acknowledgemer

W. P. Verifyer

CONTACT PERSON: Janna Wilson

14:01 MA 21 330 89

BECEINED

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| | | (Name of foreign lim | ited liability company) | | |
|---------------------|--|-------------------------|---|--|--|
|) D -7 | | - | | | |
| Delawa: | | | 3 | | |
| (Jurisdio compan | (Jurisdiction under the law of which foreign limited liability company is organized) | | (FEI number, if applicable) | | |
| . Novem | ber 25, 1998 | | 5. December 31, 2080 | | |
| | (Date of Organization) | | (Duration: Year limited liability exist or "perpetual") | company will cease to | |
| j | on filing of qualification | | | <u> </u> | |
| . <u>10400</u> | (Date first transacted busin Road. | ess in Florida. (See se | ections 608.501, 608.502, and 817.15 | 5, F.S.) | |
| Bethes | da, Maryland 20817 | | | • | |
| | | (Street address of | principal office) | | |
| | | | orida: (attach additional page | | |
| | NAME & ADDRESS: | TITLE: | NAME & ADDRESS: | if necessary) | |
| | | | | | |
| | NAME & ADDRESS: | TITLE: | | | |
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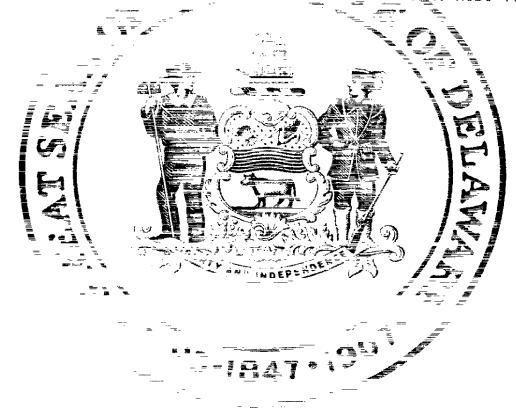
Rider A

Board of Managers

| Name | <u>Address</u> | | |
|--------------------|---|--|--|
| James L. Francis | 10400 Fernwood Road Bethesda, MD 20817 | | |
| Tracy M.J. Colden | 10400 Fernwood Road Bethesda, MD 20817 | | |
| Bruce F. Stemerman | 10400 Fernwood Road Bethesda, MD 20817 | | |

Document #: 685013 v.2

I, EDWARD J. FREEL. SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CCRC AMELIA ISLAND 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 DECEMBER, A.D. 1998.





Edward J. Freel, Secretary of State

AUTHENTICATION:

9457348

981478353

8300

2971065

DATE

12-11-98

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| nd the Florida street address of the registered agent and office are: | | |
|---|---|---|
| The Prentice-Hall Corporation System, Inc. = (Name) | - | ŧ |
| (Tame) | | ŧ |
| 1201 Hays Street Florida street address (P.O. Box NOT ACCEPTABLE) | | |
| , Additional of the second of | | |
| Tallahassee, FL 32301 City/State/Zip | | |
| | | |

Having been named as registered agent and to accept service of process for the above sittled timited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

By: Coeval (Docer (Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

| The undersigned member or authorized representative of a member of CCRC Amelia I | sland | LLC T |
|---|-------|-------------|
| certifies: | | |
| 1) the above named limited liability company has at least one member; | | |
| 2) the total amount of cash contributed by the member(s) is | \$ | 100 |
| 3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) | `\$ | N/A |
| 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.) | \$ | 100 |
| | | |
| Fraces U. a. Colden | | |
| Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) | er. | |
| Tracy M.J. Colden, Manager Typed or printed name of signee | | |

Filing Fee: \$250.00 for Application and Affidavit