Filing Fee: \$150.00



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

Office of the Secretary of State
Division of Business Services
148 W. River Street
Providence, Rhode Island 02904-2615

LIMITED LIABILITY COMPANY

SECRETARY OF STATE CORPORATIONS DIV

APPLICATION FOR REGISTRATION

Pursuant to the provisions of Section 7-16-49 of the General Laws of Rhode Island, I956, as amended, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the state of Rhode Island, and for that purpose submits the following statement:

1.	The name of the limited liability company is: Carr Healthcare Realty, LLC				
	This company has been duly organized in its state of formation as	a low-profit limited liabilit	ty company. (Check I	pox if applicable)	
2.	The name, if different, under which it proposes to register and transact business in Rhode Island is:				
3.	The limited liability company is organized under the laws of	Colorado			
4.	The date of its organization is November, 19, 2014				
5.	The period of duration of the limited liability company is (if perpetual, so state) perpetual				
6.	The address of the limited liability company's resident agent in Rhode Island is:				
	222 Jefferson Blvd, Ste 200	Warwick	, RI	02888	
	(Street Address, <u>not</u> P.O. Box)	(City/Towr		(Zip Code)	
	and the name of the resident agent at such address is	stered Agent Solutions, Inc. (Name of Agent)			
7.	The secretary of state is appointed the agent of the foreign limited liability company for service of process if at an time there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonabl diligence.				
8.	The address of any office required to be maintained in the limited liability company is organized is:	ne state or other ju	ırisdiction under	the laws of which the	
	10465 Park Meadows Dr., Ste	205			
	Lone Tree, CO 80124	FILED			
9.	The mailing address for the limited liability company is:		MAR 2 2 20	16	
	10465 Park Meadows Dr, Ste 205	817	1. 27	4075	
	Lone Tree, CO 80124	BY_	Mari	03/3	

Form No. 450 Revised: 07/12

10. Management of the Limited Liability Company (check one only):		Liability Company (check <u>one</u> only):		
	The limited liability company is to be managed by its members. (If you have checked this box, go to item No. 11 – DO NOT LIST ANY NAMES IN SECTION B.)			
	<u>or</u>			
1	B. The limited liability company is to be managed by one (1) or more managers. (If the limited liability company has managers at the time of the filing of these Articles of Organization, state the name and address of each manager.)			
	<u>Manager</u>	<u>Address</u> 10465 Park Meadows Dr, Ste 205, Lone Tree, CO 80124		
_	Colin Carr	· · · · · · · · · · · · · · · · · · ·		
-	Andrew Mondy	10465 Park Meadows Dr, Ste 205, Lone Tree, CO 80124		
-				
-		 -		
-				
11.	This application is accompanied by a certificate of good standing duly authenticated by the secretary of state or othe authorized officer of the jurisdiction under which the foreign limited liability company was organized.			
12.	The date this Application for Registration is to become effective, if later than the date of filing, is:			
_	(not prior to, nor	more than 30 days after, the filing of this Application for Registration)		
		Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments and that all statements contained herein are true and correct.		
Date	03/18/2016	Carr Healthcare Realty, LLC		
Date		Print Exact Name of Limited Liability Company Making Application		
		By Signature of Authorized Person		

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office,

Carr Healthcare Realty, LLC

is a

Limited Liability Company

formed or registered on 11/19/2014 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20141701414.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 03/17/2016 that have been posted, and by documents delivered to this office electronically through 03/18/2016 @ 15:51:57.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 03/18/2016 @ 15:51:57 in accordance with applicable law. This certificate is assigned Confirmation Number 9557591



Secretary of State of the State of Colorado

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RECEIVED
SECRETARY OF STATE
CORPORATIONS DIV

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately yalid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, http://www.sos.state.co.us/biz/CertificateSearchCriteria.do entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, http://www.sos.state.co.us/click "Businesses, trademarks, trade names" and select "Frequently Asked Questions."

I, NELLIE M. GORBEA, Secretary of State of the State of Rhode Island and Providence Plantations, hereby certify that this document, duly executed in accordance with the provisions of Title 7 of the General Laws of Rhode Island, as amended, has been filed in this office on this day:

Nellie M. Gorbea
Secretary of State

Tullin U. Horler

