

Document Number

A00000000313

CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
Tel 850 222 1092
Fax 850 222 7615
Attn: Jeff Netherton

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-02/22/00--01071--018
***148.75 ***148.75

CORPORATION(S) NAME

The Sanctuary at Winterlakes II Limited Partnership

<input type="checkbox"/> Profit	<input type="checkbox"/> Amendment	<input type="checkbox"/> Merger
<input type="checkbox"/> Nonprofit		
<input type="checkbox"/> Foreign	<input type="checkbox"/> Dissolution/Withdrawal	<input type="checkbox"/> Mark
	<input type="checkbox"/> Reinstatement	
<input checked="" type="checkbox"/> Limited Partnership	<input type="checkbox"/> Annual Report	<input type="checkbox"/> Other
<input type="checkbox"/> LLC	<input type="checkbox"/> Name Registration	<input type="checkbox"/> Change of RA
	<input type="checkbox"/> Fictitious Name	<input type="checkbox"/> UCC
<input checked="" type="checkbox"/> Certified Copy	<input type="checkbox"/> Photocopies	<input checked="" type="checkbox"/> CUS
<input type="checkbox"/> Call When Ready	<input type="checkbox"/> Call If Problem	<input type="checkbox"/> After 4:30
<input checked="" type="checkbox"/> Walk In	<input type="checkbox"/> Will Wait	<input checked="" type="checkbox"/> Pick Up
<input type="checkbox"/> Mail Out		

Name _____ 02/22/00
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
Acknowledgement _____
W.P. Verifier _____

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00 FEB 22 PM 3:59

ST. JOSEPH'S HOSPITAL
CORPORATION

NYC

2/22/00

CERTIFICATE OF LIMITED PARTNERSHIP

1. The Sanctuary at Winterlakes II Limited Partnership
(Name of Limited Partnership; must contain a suffix such as "Limited", "Ltd.", or "Limited Partnership")
2. 7800 East Kemper Road - Cincinnati, OH 45249
(Business address of Limited Partnership)
3. CT Corporation System
(Name of Registered Agent for Service of Process)
4. 1200 South Pine Island Road, Plantation, FL 33324
(Florida street address for Registered Agent)
5. Connie Bryan **CONNIE BRYAN**
(Registered Agent must sign here to accept designation as Registered Agent for Service of Process) **SPECIAL ASSISTANT SECRETARY**
6. 7800 East Kemper Road - Cincinnati, OH 45249
(Mailing Address of the Limited Partnership)

7. The latest date upon which the Limited Partnership is to be dissolved is: perpetuity

8. Name(s) of general partner(s):

Street address:

Brisben Florida II, Inc.

7800 East Kemper Road
Cincinnati, OH 45249

049000182769

Under penalties of perjury I (we) declare that I (we) have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 21st day of February, 2000

Brisben Florida II, Inc.

Signature of all general partners:

General Partner

BY:

General Partner
William O. Brisben
President

General Partner

General Partner

General Partner

General Partner

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS
FOR FLORIDA LIMITED PARTNERSHIP**

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DIVISION OF CORPORATIONS
00 FEB 22 PM 3:59

The undersigned constituting all of the general partners of _____

The Sanctuary at Winterlakes II Limited Partnership

a Florida Limited Partnership, certify:

The amount of capital contributions to date of the limited partners is \$ 0

The total amount contributed and anticipated to be contributed by the limited partners at this time
totals \$ 0

Signed this 21st day of February 2000

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjury I ~~(we)~~ declare that I ~~(we)~~ have read the foregoing and know the
contents thereof and that the facts stated herein are true and correct.

Brisben Florida II, Inc.

BY: _____

General Partner

General Partner
William O. Brisben
President

General Partner

General Partner

General Partner

General Partner