Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H050000199343)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

05 JAN 27 AM II: 32

Division of Corporations
Fax Number : (850)205-0383 ...
AMY J. PATTERSON

Account Name : CNL RETIREMENT PROPERTIES, INC.

Account Number : 120050000015 Phone : (407)650-1068 Fax Number : (407)835-3232

FOREIGN LIMITED PARTNERSHIP

CNL Retirement DAS Oakbrook IL, LP

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$140.00

Electronic Filing, Menu-

Corporate Filing

Public Access Help

HLM

CNL



CNL Center at City Commons 450 South Orange Avenue Orlando, Florida 32801-3336 tel (407) 835-3200 (890) 522-3863 www.enlonline.com

Mailing Address: R.O. Box 4920 Orlando, Florida 32802-4920

## Facsimile

To:

Division of Corporations

To Fax #:

(850)205-0383

From:

Amy Patterson

From Fax #:

(407)835-3232

Date:

1/27/05

ke:

CNL Retirement Properties, Inc.

Total pages (including cover):

6

☐ Confidential

☐ Urgent

☐ For your review

Please respond

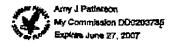
05 JAN 27 PM 4: 09

## APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

CNL Retirement DAS Oak	of limited parmership	as it is in the ho	me state)		
? Il name is unavailable, name under w mu	nich the limited partner st contain the word "Lll	ship proposes to MITED" or "LT	register or uensact busi D.")	ness in Flori	đá;
Delaware	4.	December	15, 2004		
(State of Formation)			(Date of Formation)		
Army J. Patterson	<u> </u>				
(Nam	e of Registered Agent for	or Service of Pr	ocess)	, -	
450 S. Orange Avenue					
·	(Street Address of Re	gistered Office	•		
Orlando	· · · · — - <u>· · · · · · · · · · · · · · · · · · ·</u>	, Florida	32801-3336		
(Cit	у)		(Zip Code)		
450 S. Orange Avenue	(Algent must sign	on this line)	10		
Orlando, FL 32801-3336	•			7:57	05
(Address of registered office re-	quired in state of format	ion or, if not re	quired, address of princi	pal office.)	<u></u>
). Names of general partne	irs		STREET ADDRESS	5	JAN 27
CNL Retirement DAS Oakb	rook IL GP, LLC	450 S. Oran	ge Ave., Orlando	1.1	2
Florida, 32801-3336	M05-3	71_			F 09
	<del></del>				
10. 450 S. Orange Ave., Orla	ando, FL 32801-33 es, Addresses and Contr	336 ibutions of Lim	ited Partners are kept.)		
<ol> <li>The limited partnership will under limited partner or limited partners withdrawn.</li> </ol>	take to keep the records until the limited partne	s listing the add rehip's registrat	esses and capital contril ion in Florida is canceled	ntions of the I or	:

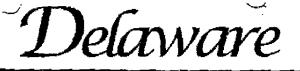
CONTINUED

12. P.O. Box 4920	·
Orlando, FL 32802-4920	
(Mailing Addres	s of Limited Partnership)
Under penalties of perjury I, being duly sworn, declare and that the faces stated herein are true and correct.	that I have read the foregoing and know the contents thereof
Signed this 4th day of January	2005
By: CNL Retirement DAS C	Pakbrook AL GP, LLC, as General Partner
By: Stuart J. Beebe, M	Sanager of General Partner
COUNTY OF ORANGE	· · ·
On this 4th day of January	2005
Stuart J. Beebe	, personally appeared before me,
☑ who is personally known to me	
whose identity I proved on the basis of	<u> </u>
Arny J. Patterson	
(Notary's Prin	red Name)



## AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Stuart J. Beebe, Manag	
general partner of CNL Retirement DAS Oakbrook IL, LP , a (an)	Delaware
limited partnership, hereinafter referred to as the "Parmership", who certifies as follo	ws:
1. The amount of capital contributions of the limited partners is \$ 4950.00	· · · · · · · · · · · · · · · · · · ·
<ol> <li>The anticipated amount of the capital contributions of the limited partners that are transacting business in Florida is \$ 4950.00</li> </ol>	allocated for the purposes of
Under the penalties of perjury $I$ , being duly sworn, declare that $I$ have read the foreg	roing and know the contents thereof and
that the facts stated herein are true and correct.	
Signed this 4th day of January 2005	. 0
By: CNL Retirement DAS Oakbrook IL GP,  By: Stuart J. Beebe, Manager of Gene	
STATE OF FLORIDA	
COUNTY OF ORANGE	
COUNTY OF ORANGE On this 4th day of January	2005
-	
On this 4th day of January	
On this 4th day of January  Stuart J. Beebe, personally	
On this 4th day of January  Stuart J. Beebe personally known to me	
On this 4th day of January  Stuart J. Beebe personally known to me	
Stuart J. Beebe	



PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CML RETIREMENT DAS OAKBROOK IL, IP" 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 SIXTEENTH DAY OF DECEMBER, A.D. 2004.

3897402 8300 040910488



Warriet Smith Windson Harries Smith Windson Secretary of State

AUTHENTICATION: 3554432

DATE: 12-16-04