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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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To:

Division of Corporations

: (850)205~0383 Fax Number

AMY J. PATTERSON From:

Account Name : CNL RETIREMENT PROPERTIES, INC.

Account Number : I20050000015 : (407)650-1068 Phone

Fax Number

: (407)835-3232

FOREIGN LIMITED PARTNERSHIP

CNL Retirement DAS South University Little Rock AR, LY

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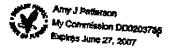
APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR JUN 16 A 9:13

, CNL Retirement DAS South University Little Rock AR, LP	TALLAHASSEE, FLORIDA
(Name of limited partnership as it is in the home state)	
2. (If name is unavailable, name under which the limited partnership proposes to register or transact busing must contain the word "LIMITED" or "LTD.")	ess în Florida;
Delaware 4. May 12, 2005	·
(State of Formation) (Date of Formation)	
5. Amy J. Patterson (Name of Registered Agent for Service of Process)	
6. 450 S. Orange Avenue, Suite 200 (Street Address of Registered Office)	<u> </u>
Orlando ,Florida 32801-3336	
(City) (Zip Code)	
7. Acceptance by the Registered Agent for Service of Process: (Agent must sign on this line) (Agent must sign on this line) 8. 450 S. Orange Ave., Suite 200, Attn: Amy Patterson	•
Orlando, FL 32801-3336	, .
(Address of registered office required in state of formation or, if not required, address of principal	office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS	
CNL Retirement DAS Little Rock AR GP, LLC	 :
450 S. Orange Avenue, Suite 200	
Oriando M05-3218	
10, 450 S. Orange Ave., Suite 200, Orlando, FL 32801-3336	
(Office where Names, Addresses and Contributions of Limited Partners are kept.)	
11. The limited partnership will undertake to keep the records listing the addresses and capital contribution limited partner or limited partners until the limited partnership's registration in Plorida is canceled or withdrawn.	ons of the
CONTINUED	

CNL

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450 S. Orange Ave., Suite 200 Attn: Amy Patterson	05 JUN 16 A 9: 1
Orlando, FL 32801-3336 SI TAL	ECRETARY OF STATALLAHASSEE, FLORI
(Mailing Address of Limited Partnership)	·
Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereo and that the facts stated herein are true and correct.	of
Signed this June day of June Caele Kellerige.	
STATE OF FLORIDA ST. Mcc President & 6P	
COUNTY OF ORANGE	
On thisday of	
Clark Hettinga, personally appeared before me,	
who is personally known to me	
whose identity I proved on the basis of	
(Northern Public Signature)	- -
Amy J. Patterson (Notary's Printed Name)	
Seal My Commission Expires:	•



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21004



The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CHL RETIREMENT DAS SOUTH UNIVERSITY LITTLE ROCK AR, LP" 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 TWELFTH DAY OF MAY, A.D. 2005.

3968928 8300 050387425

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3935013

DATE: 06-08-05

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED. D

		Z 005	JUN	16	Д	q:	13
BEFORE ME the undersigned personally appeared Clark Hettinga, SVP of the			RE T				
a general partner of CNL Retirement DAS South University Li, a (an) Delaware	Ţ	ALL	AHA	SSE	E. F	LORI	ĎΑ
limited partnership, hereinafter referred to as the "Partnership", who certifles as follows:							
1. The amount of capital contributions of the limited partners is \$ 4950.00							
 The anticipated amount of the capital contributions of the limited partners that are allocated for transacting business in Florida is \$ 4950.00 	the pur	poses	of				
Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know	w the c	onten	s there	eof an	ıd		
that the facts stated herein are true and correct.							
Signed this day of							
Clark Hettinga Sr. Vice President & GP							•
Clark Heitinga Sr. Vice President 4 6P	_						
STATE OF FLORIDA							
COUNTY OF ORANGE					-	- :	
On this June , 200	5						
Clark Hettinga , personally appeared befo	re me,						
who is personally known to me whose identity I proved on the basis of	-						
		i			_		
(Nprary Public Signature)							٠
Arny J. Patterson (Notary's Printed Name) Anny J. Patterson My Commission D002 Expure June 27, 2007							
Seal My Commission Expires:							