# 060000/4491

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
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100-14491

### **COVER LETTER**

**TO:** Registration Section Division of Corporations

### SUBJECT: CNL Senior Housing II Member, LLC

(Name of Resulting Florida Limited Company)

The enclosed Certificate of Conversion, Articles of Organization, and fees are submitted to convert an "Other Business Entity" into a "Florida Limited Liability Company" in accordance with s. 608.439, F.S.

Please return all correspondence concerning this matter to:

Linda A. Scarcelli	
(Contact Person)	
CNL Financial Group, Inc	o.
(Firm/Company)	- ASM
450 So. Orange Avenue	<u>ن کې د د د د د د د د د د د د د د د د د د </u>
(Address)	, · V:
Orlando, FL 32801	
(City, State and Zip Coo	le)
For further information concerning this	matter, please call:
Linda A. Scarcelli	at ( 407 ) 650-1552
(Name of Contact Person)	(Area Code and Daytime Telephone Number)
Enclosed is a check for the following an	nount:
\$150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\$155.00 Filing Fee and Certificate of Status	s \$180.00 Filing Fees And Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314
Tallahassee, FL 32301	

### **Certificate of Conversion**

For

### "Other Business Entity"

Into

### Florida Limited Liability Company

This Certificate of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.608.439, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of this				
Certificate of Conversion is: CNL Senior Housing II, Inc.				
(Enter Name of Other Business Entity)				
2. The "Other Business Entity" is a Corporation  (Enter entity type. Example: corporation, limited partnership, sole proprietorship,				
general partnership, common law or business trust, etc.)				
first organized, formed or incorporated under the laws of Florida				
(Enter state, or if a non-U.S. entity, the name of the country)				
on 1/17/06				
(Enter date "Other Business Entity" was first organized, formed or incorporated)				
3. If the jurisdiction of the "Other Business Entity" was changed, the state or country under the laws of which it is now organized, formed or incorporated:				
4. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:				
CNL Senior Housing II Member, LLC				
(Enter Name of Florida Limited Liability Company)				

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(The edocument of the control of the	5. If not effective on the date of filing, enter the effective date:  (The effective date: 1) cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State; AND 2) must be the same as the effective date listed in the attached Articles of Organization, if an effective date is listed therein.)						
Signed	this 27 day of January	20 <u>06</u> .					
Signat	ure of Authorized Person:	Dences.	SE.	200			
Printed	d Name: LINDA A. SCARCELLI Title	: Secretary	CRETA	2006 FEB -			
		·	RY OF STATE	-I PM 3: 54			
Fees:			المديّر	t-			
	Certificate of Conversion: Fees for Florida Articles of Organization: Certified Copy: Certificate of Status:	\$25.00 \$125.00 \$30.00 (Optional) \$5.00 (Optional)					

## ARTICLES OF ORGANIZATION OF CNL SENIOR HOUSING II MEMBER, LLC

### **ARTICLE I - NAME**

The name of this limited liability company is CNL SENIOR HOUSING HULC (the "Company").

### ARTICLE II - PRINCIPAL OFFICE

The mailing address of the principal office of the Company is Post Office Box 4920, Orlando, Florida 32802-4920, and the street address of the principal office of the Company is 450 S. Orange Avenue, Orlando, Florida 32801-3336.

### ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 450 South Orange Avenue, Orlando, Florida 32801, and the name of the initial registered agent of the Company at that address is Linda A. Scarcelli.

IN WITNESS WHEREOF, the undersigned, as an authorized representative of a member, has caused these Articles of Organization to be duly executed as of the <u>27</u> day of January, 2006.

Linda A. Scarcelli

Authorized Representative of Member

### Acceptance of Registered Agent

Having been named as registered agent and to accept service of process for the above stated limited 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 as provided for in Chapter 608, Florida Statutes.

Linda Scarcelli