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FLORIDA LIMITED LIABILITY CO.

Parksquare Senior Living LLC

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**FAX AUDIT NO. H14000267089 3**  
**ARTICLES OF ORGANIZATION**  
**OF**  
**PARKSQUARE SENIOR LIVING LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I - Name**

The name of the Limited Liability Company is: **PARKSQUARE SENIOR LIVING LLC.**

**ARTICLE II - Address**

The mailing address and street address of the principal office of the Limited Liability Company is:

150 SE 2nd Avenue, Suite 800  
Miami, Florida 33131

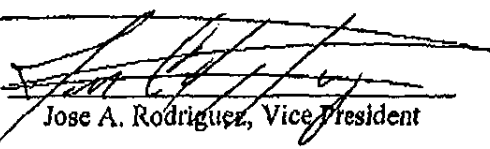
**ARTICLE III - Registered Agent/Office**

The name and Florida street address of the registered agent is:

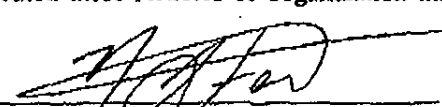
Registered Agents of Florida, LLC  
100 S.E. Second Street, Suite 2900  
Miami, Florida 33131

*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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 605, F.S.*

REGISTERED AGENTS OF FLORIDA, LLC

By:   
Jose A. Rodriguez, Vice President

The undersigned member has executed these Articles of Organization this 14 day of November, 2014.

  
Nelson Stabile, Authorized Representative of Member

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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