

L99 000007655

(Requestor's Name)

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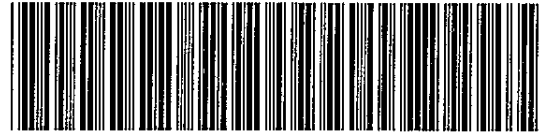
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



WILLIAMS MULLEN

Direct Dial: 757.473.5436  
wchappell@williamsmullen.com

May 19, 2004

File No: 027633.0001

**VIA FEDERAL EXPRESS**

Florida Department of State  
Division of Corporations

**Attn: LLC Filings**

409 E. Gaines Street  
Tallahassee, Florida 32399

Re: American Senior Living of Jacksonville, LLC  
FLDOC #L99000007655

**PLEASE EXPEDITE PROCESSING**

Dear Sir or Madam:

Please file the enclosed Articles of Amendment to the Articles of Organization for American Senior Living of Jacksonville, LLC.

Our firm's check in the amount of \$25.00 has been enclosed to defray costs of filing. Please return the acknowledgment of filing to my attention as soon as possible.

If you have questions regarding this filing, please contact me directly at (757) 473-5436. Thank you for your assistance with this matter.

Sincerely,

Wendy M. Chappell  
Corporate Paralegal

Enclosures

cc: Samuel M. Kroll, Esquire  
Mr. Thomas E. Rawles, Jr.  
c/o Ms. Cameron E. Larson (w/encl.)

#453389 v1 - L - FLSOS - ASL of Jax LLC

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www.williamsmullen.com

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

American Senior Living of Jacksonville, LLC

(Present Name)  
(A Florida Limited Liability Company)

**FIRST:** The date of filing of the articles of organization was November 10, 1999.

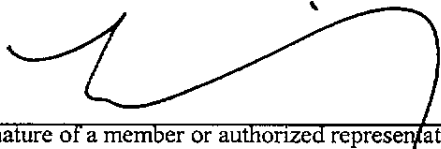
**SECOND:** The following amendment(s) to the articles of organization was/were adopted by the limited liability company:

Article IV - Management shall be deleted in its entirety and replaced with the following:

The Limited Liability Company is to be manager managed and the name and address of the manager is:

American Senior Living, Inc.  
3073 Horseshoe Drive South  
Suite 100  
Naples, Florida 34104

Dated June 17<sup>th</sup>, 2004.

  
\_\_\_\_\_  
Signature of a member or authorized representative of a member

Lawrence R. Siegel, authorized representative

\_\_\_\_\_  
Typed or printed name of signee

**FILED**  
04 JUN 18 AM 11:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00