P96000037697 C. L. PROPERTIES, INC.

ADMINISTRATIVE OFFICE

P.O. Box 369 Bonita Springs, FL 33959

Phone 813-992-6918 FAX: 813-992-6832 **EXECUTIVE OFFICE**

5015 S. Florkla Ave P.O. Box 5252 Lakeland, FL 33807-5252

Phone, 813-647-1581 FAX-813-647-3992

April 22, 1996

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Florida Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Arbor View, INC.

Dear Sir/Madam:

Enclosed you will find a completed Certificate of Limited Partnership for Arbor View, Ltd. and a check for the filing fees.

Also enclosed are the completed Articles of Incorporation for Arbor View, Inc. and a check for the filing and registered agent fees.

The contact person will be Tamara Janitz and she may be reached at (941) 992-8833. The mailing address in which to send correspondence is:

Arbor View, Ltd./Arbor View, Inc. c/o C.L. Properties, Inc. P.O. Box 369
Bonita Springs, Florida 33959-0369

Thank you for your time in this matter.

Sincerely,

Tamara Janitz

FF \$70,00

R 29 PH 2: 1 i

ARTICLES OF INCORPORATION

of

Arbor View, Inc.	FILED
The metallicular (name of corporation)	
The undersigned subscriber(s) to these Articles of Incorporation, nateral person corporation under the laws of the State of Florida.	(s) competent to contract, hereby form a
The name of the corporation is:	TALLACA ACTE FLORIDA
Arbor Viow, Inc.	
ARTICLE II - DUBATION	
This corporation shall exist perpetually unless dissolved according to Florida	4
ARTICLE III - DUODONO	
The corporation is organized for the purpose of engaging in any activities or bus United States and the State of Florida.	siness permitted under the laws of the
ARTICLE IV - CAPITAL STOOM	
the corporation is authorized to issue Five Hundred	00) of one
par value Common Stock, which shall be	designated "Common Shares,"
ARTICLE V - INITIAL REGISTERED OFFICE OF	ID ACENT
the principal office, it known, or the mailing adress of the corporation is:	
NAME Arbor View, Inc.	
TIVE BOX 309	
L. Bonrea Springs	
The name and street address of the Initial Registered Agent of this Corporation	orida zır 33959-0369 ion is:
NAME Gregory A. Erdman	OH 105
ADDRESS 3575 Bonita Beach Road	
CHY Bonita Springs FLORDA Flo	22022
ARTICLE VI - INITIAL BOARD OF DIDECTO	orida zip 33923
NAME Charles J. Erdman, Jr.	
· · · · · · · · · · · · · · · · · · ·	I I
ADDRESS P.O. Box 369	
CHY Bonita Springs STATE Flor:	ida
CHY Bonita Springs STATE Flor: NAME Gregory A. Erdman	ida ZIP 33959-0369
CHY BOX 369 CHY Bonita Springs STATE Flor: NAME Gregory A. Erdman ADDRESS P.O. Box 369	ida zır 33959-0369
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CHY BOX 369 CHY Bonita Springs STATE Flor: NAME Gregory A. Erdman ADDRESS P.O. Box 369 CHY Bonita Springs STATE Florid NAME	Zir 33959-0369

	porators signing these Articles of Incorporation are	c as follows:
Charles J. Erdman,	Jr.	
ADDRESS P.O. Box 369		
CITY Bonita Springs	SIAIR Florida	20-33959 xii
NAME Gregory A. Erdman		VII.22222-02
ADDRESS P.O. Box 369		
CTIY Bonita Springs	STATE Florida	ZIP 33959-0
NAMIS		ZII 33939-0.
ADDRESS		
TIY	STATE	ZIP
		(Scal)
		(Seal)
TATE OF FLORIDA		
) SS	
OUNTY OF Lee)	
OUNTY OF Lee)	th above, personally
OUNTY OF Lee	SS SS Re acknowledgments in the State and County set for	th above, personally
COUNTY OF <u>Lee</u> efore me, a Notary Public authorized to take ppeared:	ke acknowledgments in the State and County set for	th above, personally
OUNTY OF Lee)	th above, personally
COUNTY OF <u>Lee</u> efore me, a Notary Public authorized to take the peared:	ke acknowledgments in the State and County set for Personally Known Form of Identification Personally Known	th above, personally
county of Lee cfore me, a Notary Public authorized to take peared: Signature	ke acknowledgments in the State and County set for Personally Known Form of Identification	th above, personally
efore me, a Notary Public authorized to take peared: Signature Signature	ke acknowledgments in the State and County set for Personally Known Form of Identification Personally Known Form of Identification	
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efore me, a Notary Public authorized to take peared: Signature Signature Signature Signature Signature Own to me and known to be the person(s) who e that Charles/Gregcuted these Articles and person X as indicated opposite each name thoraxy authorized that the person X as indicated opposite each name thoraxy authorized the person X as indicated opposite each name thoraxy authorized the person X as indicated opposite each name thoraxy authorized to take the person X as indicated opposite each name thoraxy authorized to take the person X as indicated opposite each name thoraxy authorized to take the person X as indicated opposite each name thoraxy authorized to take the person X as indicated opposite each name thoraxy authorized to take the person X as indicated opposite each name thoraxy authorized to take the person X as indicated opposite each name thoraxy authorized the person X as indicated opposite each name the person X as indicated opposite	Personally Known Form of Identification Personally Known Personally Known Personally Known Form of Identification Form of Identification executed the foregaing Articles of Incorporation, who acts of Incorporation, that I relied upon the form X of Identification ine, and that an oa.h OFFM (was not) taken.	knowledged before ication of the above
Signature Signature Signature Down to me and known to be the person(s) who e that Charles/Gregecuted these Articles ned person X as indicated opposite each name	Personally Known Personally Known Form of Identification Personally Known Form of Identification Form of Identification Executed the foreging Articles of Incorporation, who acts of Incorporation, that I relied upon the form X of identification and that an oa. 10 0000000000000000000000000000000000	knowledged before ication of the above

CERTIFICATE AND ACKNOWLEDGEMENT OF REGISTERED AGENT

FILED

CERTIFICATE OF REGISTERED AGENT

OF

96 APR 29 PH 2: 11

SECREDATION STATE TALLAHASSEE, FLORIDA

Arbor View,	Inc.		
		corporation)	

Pursuant to Florida Statutes Sections 48.091 and 607.0501, the following is submitted: The above corporation, desiring to organize under the laws of the State of Florida with its registered office as indicated in the Articles of Incorporation

at P.O. Box 369 (3575 Bonita Beach Road)	
Bonita Springs, Florida 33959-0369	
has namedGregory A. Erdmaniocated at the aforesaid address, as its Registered Agent to accept serwithin this state.	vice of process

ACKNOWLEDGEMENT

Having been named as Registered Agent to accept service of process for the above stated corporation at the place designated in this certificate, and being familiar with the obligations of that position, I hereby accept to act in this capacity, and agree to comply with the provisions of Florida Law in keeping open said office.

(registered agent)