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Florida Department of State  
Division of Corporations  
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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

**LINDA A. SCARCELLI**  
Account Name : CNL FINANCIAL GROUP, INC.  
Account Number : 113615003626  
Phone : (407) 650-1000  
Fax Number : (407) 540-7522

**DISS/TERM/CANCEL/REV OF LP/LLP  
CNL INCOME & GROWTH FUND VII, LTD.**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$52.50

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15 DEC 21 AM 10:07

FILED

EFFECTIVE DATE

12/31

H15 0003 003823

**CERTIFICATE OF DISSOLUTION  
FOR**

CNL Income & Growth Fund VII, Ltd.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on June 16, 1995, assigned Florida document number A9500000024, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

Limited partnership no longer has assets.

**SECOND:**  A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: 12/31/2015

*(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)*

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

Lord C. Scovell as Secretary of  
General Partner

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75