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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Kathleen M. Walking
Account Name : CNL FINANCIAL GROUP, INC.
Account Number : 113615003626
Phone : (407) 650-1000
Fax Number : (407) 650-1065

LIMITED PARTNERSHIP AMENDMENT

CNL PLAZA VENTURE, LTD.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$1,750.00

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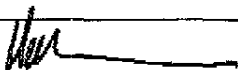
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**SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A
FLORIDA LIMITED PARTNERSHIP**The undersigned general partners of CNL Plaza Venture, Ltd._____, a
Florida Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.112,
Florida Statutes.The total amount of the capital contributions of the limited partners is: \$ 1,000,000.00.This 30 day of April, 2003.**FURTHER AFFIANT SAYETH NOT.***Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the
best of my knowledge and belief.*

General Partner(s)

By: CNL Plaza Venture, Inc. its General Partner



By: Robert A. Bourne, President of the GP

Fees:

\$7 per \$1000, based on additional
contributions
Minimum \$ 52.50
Maximum \$1750.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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TALLAHASSEE, FLORIDA

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