Division of Corp

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000056329 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

LINDA A. SCARCELLI

Account Name : CNL FINANCIAL GROUP, INC. Account Number : 113615003626

Phone : [40]
Fax Number : (40)

: (407)650-1000 : (407)650-1065 04 MAR 16 PH 2: 54
VISION OF CORPORATION

☑ 001 Page 1 of 1

FLORIDA LIMITED PARTNERSHIP

CNL Plaza II, Ltd.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$1,846.25

Placiforia Filipo Maren

Composite Fina

Public Access Hale

31104

h efe b gc efc ee

H04000056329 3

CERTIFICATE OF LIMITED PARTNERSHIP

<u>of</u>

CNL PLAZA II, LTD.

The undersigned, hereby makes, acknowledges and files with the Secretary of State of the State of Florida, this Certificate of Limited Partnership for the purpose of forming a limited partnership for profit in accordance with the laws of the State of Florida.

- 1. NAME OF PARTNERSHIP. The name of the partnership shall be CNL PLAZA

 II, LTD.
- 2. LOCATION OF PRINCIPAL PLACE OF BUSINESS. The principal place of business of the partnership shall be located at 450 S. Orange Avenue, Orlando, Florida 32801, or at such other place or places as the General Partner shall from time to time determine.
 - 3. NAME AND ADDRESS OF THE AGENT FOR SERVICE OF PROCESS:

Linda A. Scarcelli 450 S. Orange Avenue Orlando, Florida 32801

4. NAME AND BUSINESS ADDRESS OF EACH GENERAL PARTNER:

CNL PLAZA II CORP. 450 S. Orange Avenue
Orlando, Florida 32801

MAILING ADDRESS OF THE LIMITED PARTNERSHIP.

P. O. Box 4920 Orlando, Florida 32801-4920 04 MAR 16 PH 1: 05

6. <u>TERM</u>. The partnership shall be dissolved on December 31, 2050 unless sooner dissolved and terminated prior to such date as provided in the Limited Partnership Agreement of the partnership.

GENERAL PARTNER:

CNL PLAZA II CORP.

By:

Robert A. Bourne, Presiden

04 MAR 16 PM 1:05 SECRETARY OF STATE TALLAHASSEE, FLORID

ACCEPTANCE OF REGISTERED AGENT

THE UNDERSIGNED, Linda A. Scarcelli, accepts her designation as Registered Agent for CNL PLAZA II, LTD. and the obligations imposed on her as Registered Agent pursuant to the Florida Revised Uniform Limited Partnership Act, Florida Statutes, Chapter 620.

Tinda M. Scarcelli, Revistered Agent

H04000056329 3

AFFIDAVIT OF LIMITED PARTNERS' CONTRIBUTIONS

Pursuant to the provisions of the Florida Revised Uniform Limited Partnership Act, Florida Statutes, Chapter 620.108, the undersigned certifies that the capital contributions of the Limited Partners of CNL PLAZA II, LTD. are \$1,073,220 to date. The anticipated amount of additional capital contributions of the limited partners is \$20,000,000.

FURTHER AFFIANT SAYETH NOT.

Under the penalties of perjuty I declare that I have read the foregoing and know the contents thereof and the facts stated herein are true and correct.

EXECUTED this 15th day of March, 2004.

GENERAL PARTNER:

CNL PLAZA II CORP.

Robert A. Bourne, President

04 MAR 16 PM 1: 05
SECRETARY OF STATE
ALL AHASSEF, FLORIDA