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To:

Division of Corporations

[‡]ુ (850) 205−0383 Fax Number

From:

SUZANNE M. McLAUGHLIN

Account Name

: CNL FINANCIAL GROUP, INC.

Account Number: 113615003626

Phone Fax Number

: (407)650-1000 : (407)650-1065

LIMITED PARTNERSHIP AMENDMENT

| Certificate of Status | 1 |
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Expires October 03, 2004

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CERTIFICATE OF AMENDMENT TO APPLICATION FOR REGISTRATION OF

| CNL R | etirement Camarilla CA, LP | | |
|---|--|-------------------|----------|
| | (Insert name currently on file with Florida Dept. of State) | | |
| Pursuant to the prov hereby submits this | visions of section 620.173, Florida Statutes, this foreign limited partnership certificate of amendment to its registration application: | | |
| The registration appl | lication is amended as follows: | | |
| A typographical Partnership show | error occurred in the initial filing, and the name of the uld be as follows: | e Limited SFCR | I |
| | (Signature of a General Partner) | | 7 7 7 7 |
| | <u> </u> | ် ကြွေ | |
| I | homas J. Hutchison, III, Executive Vice President of GNL | Retireme | ni |
| STATE OFFLORE | mai Gr, LLC. as General Partner | | |
| COUNTY OFORA | | | |
| = | | | |
| On this <u>5th</u> day of <u>l</u> appeared before me, | March , 2002 , Thomas J. Hutchison, III personally | | |
| EXIC | who is personally known to me | | |
| | | | |
| _ | whose identity I proved on the basis of | 4 2. 4 | <u>.</u> |
| | | | _ |
| S | sparke AMA Condi- | , | |
| | (Notary Public Signature) | | |
| | SUZANNE M. MCLAUGHLIN | | |
| Suzanne M McLaughlin | (Notary's Printed Name) | | |

My Commission Expires: