

BO2000000305

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.**

((H02000200405 7))

**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: **AMY J. PATTERSON**  
Account Name : CNL FINANCIAL GROUP, INC.  
Account Number : 113615003626  
Phone : (407) 650-1000  
Fax Number : (407) 650-1065

RECEIVED  
02 SEP 19 PM 3:19  
DIVISION OF CORPORATION

**FOREIGN LIMITED PARTNERSHIP**

**CNL Retirement PC1 North Carolina, LP, a Delaware Limited Partnership**


Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$148.75

APPROVED  
LAND  
FILED  
02 SEP 19 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
JB  
9-20-02

H02000200405 7

Florida Department of State, Sandra B. Mortham, Secretary of State

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR  
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. CNL Retirement PCI North Carolina, LP  
(Name of limited partnership as it is in the home state)
2. CNL Retirement PCI North Carolina, LP, a Delaware Limited Partnership  
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")
3. Delaware (State of Formation) 4. September 18, 2002 (Date of Formation)
5. Linda A. Scarcelli  
(Name of Registered Agent for Service of Process)
6. 450 S. Orange Avenue  
(Street Address of Registered Office)
- Orlando (City), Florida 32801 (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:  
Linda A. Scarcelli  
  
(Agent must sign on this line)
8. 450 S. Orange Avenue  
Orlando, FL 32801-3336  
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS  
CNL Retirement PCI GP, LLC MO20000002472  
450 S. Orange Avenue Orlando, FL 32801
10. 450 S. Orange Avenue Orlando, FL 32801-3336  
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

02 SEP 19 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
APPROVED  
AND  
FILED

H02000200405 7

12, P.O. Box 4920

Orlando, FL 32802-4920

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

This 19 day of September, 2002

Linda A. Scarcelli, Assistant Secretary of GP

STATE OF FLORIDACOUNTY OF ORANGEOn this 19 day of September, 2002

Linda A. Scarcelli personally appeared before me,

☒ who is personally known to me☐ whose identity I proved on the basis of \_\_\_\_\_  
(Notary Public Signature)

Amy J. Patterson

(Notary's Printed Name)

Seal



Amy J. Patterson

My Commission CC649907

Expires June 27, 2003

My Commission Expires: \_\_\_\_\_

APPROVED  
AND  
FILED  
02 SEP 19 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H02000200405 7

H02000200405 7

**AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP**

BEFORE ME the undersigned personally appeared Linda A. Scarcelli, Assistant Secretary of the  
general partner of CNL Retirement PCI North Carolina, LP, a (an) Delaware  
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ \$4950.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 4,950.00.

*Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.*

This 19 day of September, 2002.

Linda A. Scarcelli  
Linda A. Scarcelli, Assistant Secretary of GP

STATE OF FLORIDACOUNTY OF ORANGE

On this 19 day of September, 2002,

Linda A. Scarcelli, Assistant Secretary of the General Partner, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of \_\_\_\_\_

Amy J. Patterson  
(Notary Public Signature)

Amy J. Patterson  
(Notary's Printed Name)

Seal



Amy J. Patterson

My Commission CC849907 My Commission Expires:  
Expires June 27, 2003

02 SEP 19 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

09/19/02 14:03 FAX 407 650 1065

CNL TAX ACCOUNTING

005

FROM CORPORATION TRUST WILM. TEAM #4

(WED) 9.18'02 16:37/ST. 16:31/NO. 4863796062 P 38

H02000200405 7

# Delaware

PAGE 1

*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT PCI NORTH CAROLINA, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF SEPTEMBER, A.D. 2002.



*Harriet Smith Windsor*  
Harriet Smith Windsor, Secretary of State

3569963 8300

020580565

AUTHENTICATION: 1989062

DATE: 09-18-02

H02000200405 7