

**B02000000308**

Florida Department of State  
Division of Corporations  
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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

DIVISION OF CORPORATION

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RECEIVED

**FOREIGN LIMITED PARTNERSHIP**

**CNL Retirement PC1 Naples FL, LP, a Delaware Limited Partnership**

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$1,846.25

9/20/02

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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 Naples FL, LP  
(Name of limited partnership as it is in the home state)
2. CNL Retirement PCI Naples FL, 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 4. September 18, 2002  
(State of Formation) (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, Florida 32801  
(City) (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 Naples FL, LLC 450 S. Orange Avenue Orlando, FL 32801 - M02000000 2473
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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.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

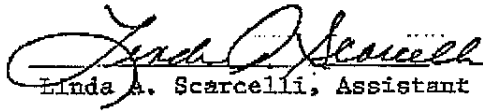
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12. P.O. Box 4920

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)



Amy J. Patterson  
My Commission CC949807  
Expires June 27, 2003

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

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

BEFORE ME the undersigned personally appeared Linda A. Scarcelli, Assistant Secretary of the  
a general partner of CNL Retirement PCI Naples FL, 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 \$ \$1,000,000.

*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 FLORIDA  
COUNTY 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)  
Amy J Patterson  
My Commission CC949907

Seal Expires June 27, 2003

My Commission Expires:

FROM CORPORATION TRUST WILM TEAM #4

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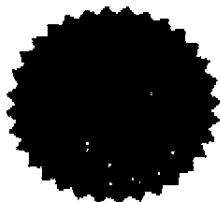
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# Delaware

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*The First State*

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT PCI NAPLES FL, 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

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020580484

AUTHENTICATION: 1989028

DATE: 09-18-02

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