

Division of Corporations

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TALLAHASSEE, FLORIDA

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

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02 SEP 19 PM 3:19
DIVISION OF CORPORATION

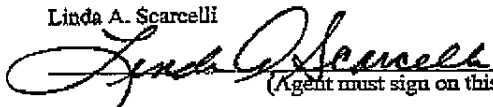
FOREIGN LIMITED PARTNERSHIP

**CNL Retirement PC1 Friendship Heights MD, LP, a Delaware
Limited Partnership**

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

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

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDAFILED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

1. CNL Retirement PC1 Friendship Heights MD, LP
(Name of limited partnership as it is in the home state)
2. CNL Retirement PC1 Friendship Heights MD, 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 |
|-----------------------------------|---|
| <u>#MD2000602472</u> | |
| <u>CNL Retirement PC1 GP, LLC</u> | <u>450 S. Orange Avenue Orlando, FL 32801</u> |
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.

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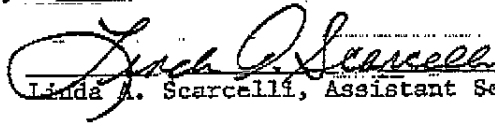
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12. P.O. Box 4920

Orlando, FL 32802-4920

(Mailing Address of Limited Partnership)

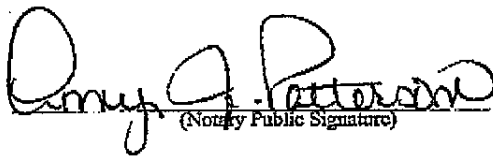
Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

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)

Seal

My Commission Expires: _____



Amy J Patterson
My Commission CC349807
Expires June 27, 2003

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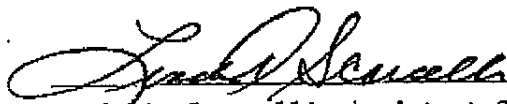
AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Linda A. Scarcelli, Assistant Secretary of the
a general partner of CNL Retirement PC1 Friendship Heights MD, 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, 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 _____


(Notary Public Signature)

Amy J. Patterson

(Notary's Printed Name)

Amy J. Patterson



My Commission CC649907

Seal

Expires June 27, 2003

My Commission Expires:

09/19/02 13:56 FAX 407 650 1065

CNL TAX ACCOUNTING

005/005

FROM CORPORATION TRUST WILM. TEAM #4

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Delaware

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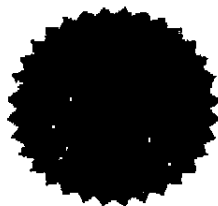
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT FC1 FRIENDSHIP HEIGHTS MD, 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.

FILED
2002 SEP 19 AM 8:49
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 1989056

DATE: 09-18-02

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