## Florida Department of State

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Division of Corporations

: (850)205-0383 Fax Number

From:

Kathleen M. Walkling

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 : (407)650-1000 : (407)650-1065 Fax Number

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		CNL RETIREMENT MA2 ARKANSAS, LP			
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## SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

The undersigned general partners ofCNL Retirement MA2 Arkansas, LP	.o						
a (an) Delaware							
Limited Partnership, executed this supplemental affidavit filed pursuant to section 620.176,							
Florida Statutes. The total amount of the capital contributions of the limited partners that is							
allocated for the purpose of transacting business in Florida is: \$ 4,950.00	O 2						
Signed this 17 day of 10000 ,2003 . ASSET							
FURTHER AFFIANT SAYETH NOT.	ž O						
Under penalties of perjury I declare that I have read the foregoing and that the facts are true, to the best of my knowledge and belief.	B						
By: CNL Retirement MA2 GP Holding, LLC as General Part	ner						
General Partner							

## FEES:

Linda A. Scarcelli, Assistant Secretary of GP

\$7 per \$1,000 based on the additional contributions (Minimum \$52.50 - Maximum \$1,750.00)

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tzilzhassee, FL 32314

INH\$21(1/00)