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# Florida Department of State

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To:

Division of Corporations

Fax Number : (850)205-0383

Kathleen M. Walkling

Account Name : CNL FINANCIAL GROUP, INC.

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

## LIMITED PARTNERSHIP AMENDMENT

CNL RETIREMENT MAZ CALIFORNIA, LP

Certificate of Status	0
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# SUPPLEMENTAL AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

The undersigned general partners of	CNL Retirement MA2 California, LP
	a (an) Delaware
Limited Partnership, executed this su	applemental affidavit filed pursuant to section 620.176,
Florida Statutes. The total amount of	f the capital contributions of the limited partners that is
allocated for the purpose of transaction	ng business in Florida is: \$ 4,950.00
Signed this 1th day of Mc	may , 2003.

### FURTHER AFFIANT SAYETH NOT.

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.

By: CNL Retirement MA2 GP Holding, LLC as General Partner
General Partner

By: Linda A. Scarcelli, Assistant Secretary of GP

### FEES:

\$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
Tallahassee, FL 32314

INH\$21(1/00)