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To:

Division of Corporations

Fax Number

Fax Number : (850)205-0383

From:

Kathleen M. Walkling

Account Name Account Number: 113615003626

: CNL FINANCIAL GROUP, INC.

Phone

: (407)650-1000 : (407)650-1065

LIMITED PARTNERSHIP AMENDMENT

CNL RETIREMENT MA4 NORTHVILLE MI, LP

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$105.00

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CERTIFICATE OF AMENDMENT TO APPLICATION FOR REGISTRATION OF

CNL Retirement MA4 Northville MI, LP

(Insert name currently on file with Florida Dept. of State)
Pursuant to the provisions of section 620.173, Florida Statutes, this foreign limited partnership hereby submits this certificate of amendment to its registration application:
The registration application is amended as follows:
The general partner shall be amended to CNL Retirement MA4 GP Northville MI,
450 S. OBANGE AVENUE ORLANDO FL 32801
(Signature of a General Partner)
Linda A. Scarcelli, Asst Secretary of GP
(Typed or printed name of General Partner signing above)
STATE OF FLORIDA
COUNTY OF ORANGE
On this 4 day of July , 2003, Linda A. Scarcelli personally appeared before me,
who is personally known to me
whose identity I proved on the basis of
— Whose retaining 1 provide on the basis of
The a So MAN Anoth.
(Notary Public/Sighature)
Suzanne M. McLaughlin
(Notary's Printed Name)

Seal

My Commission Expires:

