

Division of Corporations

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BD3000000271

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

LIMITED PARTNERSHIP AMENDMENT

CNL RETIREMENT EDEN1 JACKSONVILLE FL, LLLP, LTD.

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FLORIDA DEPARTMENT OF STATE

Glenda H. Hood
Secretary of State

November 13, 2003

CNL RETIREMENT EDEN1 JACKSONVILLE FL, LLLP, LTD.
PO BOX 4920
ORLANDO, FL 32802-4920

SUBJECT: CNL RETIREMENT EDEN1 JACKSONVILLE FL, LLLP, LTD.
REF: B03000000271

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CNL TAX ACCOUNTING

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**CERTIFICATE OF AMENDMENT
TO
APPLICATION FOR REGISTRATION
OF**

CNL Retirement Eden1 Jacksonville FL, LLLP, Ltd.

(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 name under which the limited liability limited partnership proposes to register or transact business in Florida is: CNL Retirement Eden1 Jacksonville FL, Limited Liability Limited Partnership.

By: CNL Retirement Eden1 Florida GP, LLC, General Partner


(Signature of a General Partner)

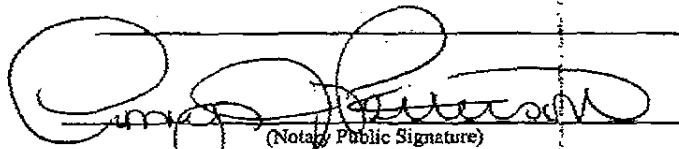
Linda A. Scarcelli, Assistant Secretary of GP
(Typed or printed name of General Partner signing above)

STATE OF FLORIDA

COUNTY OF ORANGE

On this 13 day of November, 2003, 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 DD0203735
Expires June 27, 2007

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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