

11/13/03 13:26 FAX 407 650 1065

CNL TAX ACCOUNTING

001/004

Division of Corporations

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BD3000000273

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 GAINESVILLE FL, LLLP, LTD

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FLORIDA DEPARTMENT OF STATE

Glenda H. Hood  
Secretary of State

November 13, 2003

CNL RETIREMENT EDEN1 GAINESVILLE FL, LLLP, LTD.  
P.O. BOX 4920  
ORLANDO, FL 32802-4920

SUBJECT: CNL RETIREMENT EDEN1 GAINESVILLE FL, LLLP, LTD.  
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**CERTIFICATE OF AMENDMENT  
TO  
APPLICATION FOR REGISTRATION  
OF**

CNL Retirement Eden1 Gainesville 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 Gainesville 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

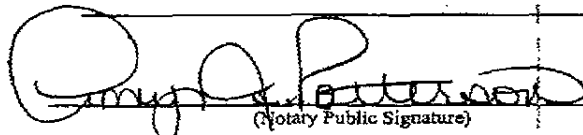
On this 13 day of November, 2003, Linda A. Scarcelli personally appeared before me,



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



Amy J. Patterson  
My Commission DD0203735  
Expires June 27, 2007

My Commission Expires:

SE  
NOTARY PUBLIC  
STATE OF FLORIDA

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APPROPRIATE  
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