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To:

Division of Corporations
Fax Number : (850)205-0383
Kathleen M. Walkling

MJH

From:

Account Name : CNL FINANCIAL GROUP, INC.
Account Number : 113615003626
Phone : (407)650-1000
Fax Number : (407)540-2699

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DIVISION OF CORPORATIONS

FOREIGN LIMITED PARTNERSHIP

CNL INCOME COPPER, LP

Certificate of Status	1
Certified Copy	1
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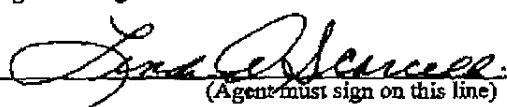
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**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. CNL INCOME COPPER, LP
(Name of limited partnership as it is in the home state)
2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")
3. DELAWARE 4. 9/29/2004
(State of Formation) (Date of Formation)
5. LINDA A SCARCELLI
(Name of Registered Agent for Service of Process)
6. 450 S ORANGE AVENUE
(Street Address of Registered Office)
- ORLANDO, Florida 32801-3336
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:

(Agent must sign on this line)
8. 450 S ORANGE AVENUE
ORLANDO FL 32801-3336
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
CNL INCOME COPPER GP, LLC 450 S ORANGE AVENUE, ORLANDO FL 32801
MCY-4/36
10. 450 S ORANGE AVENUE, ORLANDO, FL 32801-3336
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

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12. PO BOX 4920

ORLANDO, FL 32802-4920

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 30 day of September 2004
By: Charles A. Muller, Manager of the GP, CNL Income Copper GP, LLC

Charles A. Muller
General Partner

STATE OF FLORIDA

COUNTY OF ORANGE

On this 30 day of September, 2004

CHARLES A. MULLER, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of

Kathleen M. Walkling
(Notary Public Signature)

KATHLEEN M. WALKLING
(Notary's Printed Name)

Seal

My Commission Expires:



Kathleen M. Walkling
My Commission DD24989
Expires June 22, 2007

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AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Charles A. Muller, Manager of CNL Income Copper GP, LLC
a general partner of CNL Income Copper, LP, a (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 4,995.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 4,995.00.

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 30 day of September, 2004.
By: Charles A. Muller, Manager of the GP CNL Income Copper GP, LLC

Charles A. Muller
General Partner

STATE OF Florida

COUNTY OF Orange

On this 30 day of September, 2004.

Charles A. Muller, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

Kathleen M. Walking
(Notary Public Signature)

Kathleen M. Walking
(Notary's Printed Name)



Kathleen M. Walking
My Commission ID 00224980
Expires June 22, 2007

Seal My Commission Expires: _____

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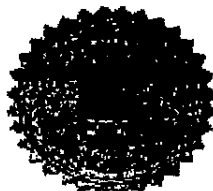
Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL INCOME COPPER, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTIETH DAY OF SEPTEMBER, A.D. 2004.



Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

3861697 8300

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AUTHENTICATION: 3382922

DATE: 09-30-04

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