Division of Corporations

Page 1 of 1



Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000223485 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

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)540-2699

FOREIGN LIMITED PARTNERSHIP

CNL Retirement Aur1 California B Pack, LP

	<u> </u>	<u> </u>
Certificate of Status	. 0	
Certified Copy	. 0	
Page Count	04	;
Estimated Charge	\$87.5	0

Electronic Filing Menu.

Corporate Filing

Public Access Help

== : 05

withdrawn.

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Name of limited)	partnership as it is in the home state)
If name is unavailable, name under which the lim must contain th	nited partnership proposes to register or transact business in Floridate word "LIMITED" or "LTD.")
Delaware	4 October 20, 2004
(State of Formation)	(Date of Formation)
Linda A. Scarcelli	
(Name of Registe	ared Agent for Service of Process)
450 S. Orange Avenue	
(Street Ac	kiress of Registered Office)
Orlando	Florida 32801-3336
(City)	(Zip Code)
450 S. Orange Avenue	t must sign on this line)
Orlando, FL 32801-3336	
(Address of registered office required in stat	te of formation or, if not required, address of principal office.)
NAMES OF GENERAL PARTNERS	STREET ADDRESS
. NAMES OF GENERAL PARTNERS CNL Retirement Aur1 California B Pa	
•	STREET ADDRESS
CNL Retirement Aur1 California B Pa	STREET ADDRESS

CONTINUED

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

12. P.O. B	ox 4920			<u> </u>
Orland	o, FL 32802-4920		•	
(Mailing Address of Limited Partnership)				
	es of perjury I, being duly sworn, declare the acts stated herein are true and correct.	at I have read the for	egoing and know the contents ther	cof
igned this	28th day of October		, 2004	
	By: CNL Retirement Ayrl Co	lifornia B Pa	ack GP, LLC, as GP	
	By: Linda A Scapteill,	ASSISTANT SEC	eretary of GP	•
TATE OF	FLORIDA	_		
OUNTY OF	ORANGE			
On th	us <u>28th</u> day of October	<u>, 2004</u>		
	Scarcelli, Assistant Secretary	-of-GP	, personally appeared before me,	1 · · · · · · · · · · · · · · · · · · ·
who is peri	sonally known to me			
] whose idea	ntity I proved on the basis of			•
- WINDER 1244				-
	Amy J. Patterson (Notary's Printed)	gnature)		CONTRACT STATES
Scal	My Commission Expires:	·		60°



AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally ap	peared Linda A. Scarcelli,	Assistant Secretary	of the
a general partner of CNL Retirement	Aur1 California B Pack,	(an)_Delaware	
limited partnership, hereinafter referred to a	s the "Partnership", who certifies as	follows:	
1. The amount of capital contributions of th	e limited partners is \$ 4,950.00	_•	
 The anticipated amount of the capital convansacting business in Florida is \$ 4.95 		at are allocated for the purpo	ses of
Under the penalties of perjury I, being duly	sworn, declare that I have read the	foregoing and know the con	tents thereof and
that the facts stated herein are true and corr	rect.		
Signed this 28th day of October	2004		
BY: CNL Ret	tirement Auri Californi Lac. Scarcelli, Assistant	te B Pack GP, LLC,	as GP
en comité à			
STATE OF FLORIDA			
STATE OF FLORIDA COUNTY OF ORANGE			
COUNTY OF ORANGE	day ofOctober		
COUNTY OF ORANGE On this 28th	anatom of MAF		3.75
COUNTY OF ORANGE	anatom of MAF	2004 naily appeared before me,	04 hov
COUNTY OF ORANGE On this 28th	anatom of MAF		9-104 70 04 704 -5
COUNTY OF ORANGE On this 28th Linda A. Scarcelli, Assistant Se	ecretary of GPTR perso		04 h01 -9 al
COUNTY OF ORANGE On this 28th Linda A. Scarcelli, Assistant Se	ecretary of GPTR perso		04 h04 9 - 404 12 12 12 12 12 12 12 12 12 12 12 12 12
COUNTY OF ORANGE On this 28th Linda A. Scarcelli, Assistant Se	ecretary of GPTR perso		04 h0y +9 AMH: 05
On this 28th Linda A. Scarcelli, Assistant Se who is personally known to me whose identity I proved on the basis of	ecretary of GPTR perso		

11/09/2004 12:09 FAX

FROM CT WILMINGTON - 302_655_4236 GROUP 6 (THU) 10. 21' 04 10:57/ST. 10:50/NO. 4260103248 P 35 H04000223485 3



The First State

I, BARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT AURI CALIFORNIA B PACK, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAFARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO PAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FIRST DAY OF OCTOBER, A.D. 2004.



Harriet Smith Windsor, Secretary of State

3870404 8300

040758379

AUTHENTICATION: 3424156

DATE: 10-21-04

_ H04000223485 3