

Florida Department of State
Division of Corporations
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To: Division of Corporations
 Fax Number : (850) 617-6383

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

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address:

amy.patterson@cnl.com

LP/LLP AMENDMENT/RESTATEMENT/CORRECTION
CNLSUN TWO SIMI VALLEY CA SENIOR LIVING, LP

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$52.50

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Corporate Filing Menu

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AMENDMENT TO CERTIFICATE OF AUTHORITY
FOR
FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP

1. The name of the limited partnership or limited liability limited partnership as it appears on the records of the Florida Department of State is:

CNLSun Two Simi Valley CA Senior Living, LP

2. The jurisdiction of its formation is: Delaware

3. The date the entity was authorized to transact business in Florida is: 10/24/2011

4. If the amendment changes the name of the limited partnership or limited liability limited partnership, enter the new name:

CLPSun Two Simi Valley CA Senior Living, LP

Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.

Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.

5. If the amendment changes the general partner(s), list the name and business address of each general partner:

Name:

Business Address:

CLPSun Two Pool One GP, LLC

450 S. Orange Avenue
Orlando, FL 32801

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6. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

7. If the amendment corrects any false statement listed in the application, indicate the statement being corrected and the correction:

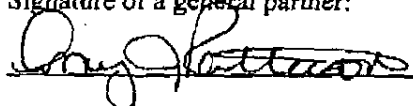
8. If the amendment is to add or delete an election to be a limited liability limited partnership statement, check the appropriate box:

- ☐ The entity elects to be a limited liability limited partnership.
- ☐ The entity is no longer a limited liability limited partnership.

9. Attached is an original certificate, no more than 90 days olds, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

10. Effective date, if other than the date of filing: _____
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signature of a general partner:



Typed or printed name:

Amy J. Patterson, Authorized Representative *GP*

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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Delaware

PAGE 1

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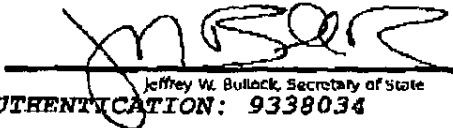
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "CNLSUN TWO SIMI VALLEY CA SENIOR LIVING, LP", CHANGING ITS NAME FROM "CNLSUN TWO SIMI VALLEY CA SENIOR LIVING, LP" TO "CLPSUN TWO SIMI VALLEY CA SENIOR LIVING, LP", FILED IN THIS OFFICE ON THE FIRST DAY OF FEBRUARY, A.D. 2012, AT 9:27 O'CLOCK A.M.

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You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 9338034

DATE: 02-02-12

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State of Delaware
Secretary of State
Division of Corporations
Delivered 10:00 AM 02/01/2012
FILED 09:27 AM 02/01/2012
SRV 120108856 - 4417512 FILE

CERTIFICATE OF AMENDMENT

TO

CERTIFICATE OF LIMITED PARTNERSHIP

OF

CNLSUN TWO SIMI VALLEY CA SENIOR LIVING, LP

FIRST. The name of the limited partnership is CNLSUN TWO SIMI VALLEY CA SENIOR LIVING, LP (the "Company").

SECOND. Article I of the Certificate of Limited Partnership of the Partnership, filed on 9/4/2007 in the Office of the Secretary of State of the State of Delaware, shall be amended as follows:

The name of the Partnership shall be CLPSun Two Simi Valley CA Senior Living, LP.

IN WITNESS WHEREOF, the undersigned Authorized Person of the General Partner of the Partnership has executed this Certificate of Amendment to Certificate of Limited Partnership this 31st day of January, 2012.

By: **CNLSUN TWO POOL ONE GP, LLC,**
as General Partner

By: /S/ AMY J. PATTERSON
Name: Amy J. Patterson
Title: Authorized Person

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