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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

AMY J. PATTERSON GROUP, INC.

Account Name Account Number : 113615003626

Phone

: (407)650-1000

Fax Number

: (407)650-1065

## FOREIGN LIMITED LIABILITY COMPANY

CNL Retirement Eden2 Georgia GP, LLC

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Estimated Charge	, \$160.00

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#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN

######################################	E BIAIS OF PLANES.
	limited liability company)
Delaware	a Applied for
Jurisdiction under the law of which foreign limited liability	3. Applied for (FEI number, if applicable)
company is organized)	÷
October 7, 2003	5. Perpetual
(Date of Organization)	(Duration: Year limited liability company will cease to exist or "perpetual")
Upon qualification	
	e sections 608.501, 608.502, and 817.155, F.S.)
450 S. Orange Avenue	3
400 D. Olango Atoliac	2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
Orlando, FL 38201-3336	United the second secon
(Street address	s of principal office)
WAR 2 2 4 4 4 44 .	,—(/) F
If limited liability company is a manager-managed	company, check here
The name and usual business addresses of the mar	ar and ar fallower
James M. Seneff, Jr., 450 S. Orange Ave.,	Orlando, FL 32801-3336
Robert A. Bourne, 450 S. Orange Ave., Orla	ando, FL 32801-3336
Bernard J. Angelo, 445 Broad Hollow Rd.	, Melville, NY 11/4/
	\$
Association of the control of the co	Oder ald driver the strained by the official begins and Lagon
	O days old, duly anther ticated by the official having custody of rec stocopy is not acceptable. If the certificate is in a forcign language,
translation of the certificate under oath of the translator must b	
	•
Nature of business or purposes to be conducted or	r promoted in Florida: General Partner
of CNL Retirement Eden2 Georgia, LP	
or order rollicition Edding Goorgia, El	A CONTRACTOR OF THE CONTRACTOR
Signature of a member of an ar	thorized representative of a member.
(in accordance with section 608.408(3), i	F.S., the execution of this document constitutes
an affirmation under the penalties of per	jury that the facts stated herein are true.)
Robert A. Bourne, Manage	
Typed or printer	i name of signee

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	•	
	i	
CNL Retirement Eden2 Georgia GP, LLC	:	_

2. The name and the Florida street address of the registered agent and office are:

Linda A. Scarcell	i	
	(Name)	
450 S. Orange A	venue	
Florida st	reet address (P.O. Box <u>NOT</u> ACCEPTABLE)	
	¥	
Orlando	<sub>FL</sub> 32801-3336	- ·
	(City/State/Zip)	<del></del>

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Signature Scarcell

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT EDEN2 GEORGIA GP, LLC" 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 THIRTEENTH DAY OF OCTOBER, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAKES HAVE NOT BEEN ASSESSED TO DATE.



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2685669

DATE: 10-13-03

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