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ORPORANCE ...

AMY J. PATTERSON Account Name

: CNL RETIREMENT PROPERTIES, INC.

Account Number : I20050000015

Phone

: (407)650-1068

Fax Number

: (407)835-3232

95

### FOREIGN LIMITED LIABILITY COMPANY

CNL Retirement DAS Fredericksburg VA GP, LLC

Certificate of Status	1
Certified Copy	1
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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 LIMITED LIBITATY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Name of Foreign Limit	ed Lia	ability Company)		
Delaware	2	54-2173832		
(Jurisdiction under the law of which foreign limited liabili company is organized)	ity .	(FEI number, if appl	icable)	
May 12, 2005	5	Perpetual		
(Date of Organization)		(Duration: Year limited liability of exist or "perpetual")	ompany w	ill cease to
Upon qualification		•		
(Date first transacted business in (See sections 608.501 & 608.502				
450 S. Orange Ave., Suite 200, Attn: Arry Patterson	n			
Orlando, FL 32801-3336				
(Street Addi	ress of	Principal Office)		
If limited liability company is a manager-manager				
in minica habitity company is a manager-manag	ged c	ompany, check here 🔽		
The name and usual business addresses of the m		<u> </u>	as follow	78:
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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

TO DESIGNATE A REGISTERED OF FLORIDA.	FICE AND REGISTERED AGENT IN THE S	TATE OF
1. The name of the Limited Liability C	Company is:	
CNL Retirement DAS Fredericksburg VA G	SP, LLC	
2. The name and the Florida street add	lress of the registered agent and office are:	
Amy J. Patterson		
	(Name)	-
450 S. Orange Avenue,	Suite 200	
Florida Stree	et Address (P.O. Box NOT ACCEPTABLE)	-
Orlendo	FL 32801-3336	
	City/State/Zip	-
liability company at the place designated agent and agree to act in this capacity. It relating to the proper and complete perfoliolisations of my position as registered (Signature)		ment as registered all statutes
	5.00 Designation of Registered Agent 0.00 Certified Copy (optional)	

5.00 Certificate of Status (optional)

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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 RETIREMENT DAS EREDERICKSBURG VA 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 TWELFTH DAY OF MAY, A.D. 2005.

SECRETARY OF STATE A



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050387514

Varnet Smith Hindson

Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3874923

DATE: 05-12-05

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