Division of Corporations Electronic Filing Cover Sheet

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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

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

Email Address: Ony pattersone colocom

ZAPR-5 AN 7:03 Foretany of State

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN CNL INCOME AMUSEMENT II, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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APR - 62012

EXAMINER

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA H12000088368 3

SECTION I (1-3 must be completed)

1.	Name of limited liability company as it appears on the records of the Florida Department of State: CNL Income Amusement II, LLC	
2.	Jurisdiction of its organization: Delaware	
3.	Date authorized to do business in Florida: 2/6/2007	
	SECTION II (4-7 complete only the applicable changes)	
4.	If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 2/1/2012	
5.	New name of the limited liability company: CLP Amusement II, LLC (must end with "Limited Liability Company," "L.L.C.," or "LLC."	
Fl th	f name unavailable, enter alternate name adopted for the purpose of transacting business in a lorida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C." (17) (20) (20) (20) (20) (20) (20) (20) (20	
6.	If the amendment changes the period of duration, indicate new period of duration:	
7.	If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	
8.	If the amendment corrects any false statement, indicate the statement being corrected and the correction:	
9.	Attached is an original certificate, no more than 90 days old, 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. Signature of a member of the authorized representative of a member	n

Amy J. Patterson, Authorized Representative

Typed or printed name of signee

Filing Fee: \$25.00

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Delaware

PAGE 1

The First State

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 "CNL INCOME AMUSEMENT II, LLC", CHANGING ITS NAME FROM "CNL INCOME AMUSEMENT II, LLC" TO "CLP AMUSEMENT II, LLC", FILED IN THIS OFFICE ON THE FIRST DAY OF FEBRUARY, A.D. 2012, AT 8:26 O'CLOCK A.M.

4262925 8100

120108547

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

AUTHENTICATION: 9337853

DATE: 02-02-12

H12000088268 3

State of Delaware Secretary of State Division of Corporations Delivered 09:11 AM 02/01/2012 FILED 08:26 AM 02/01/2012 SRV 120108547 - 4262925 FILE

CERTIFICATE OF AMENDMENT

TO

CERTIFICATE OF FORMATION

OF

CNL INCOME AMUSEMENT II, LLC

FIRST. The name of the limited liability company is CNL INCOME AMUSEMENT II, LLC (the "Company").

SECOND. Article 1 of the Certificate of Formation of the Company, filed on 12/6/2006 in the Office of the Secretary of State of the State of Delaware, shall be amended as follows:

The name of the Company shall be: CLP Amusement II, LLC.

IN WITNESS WHEREOF, the undersigned Authorized Person of the Company has executed this Certificate of Amendment to Certificate of Formation this 31st day of January, 2012.

By: /S/AMY J. PATTERSON

Name: Amy J. Patterson Title: Authorized Person