Florida Department of State

Division of Corporations 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.

(((H15000056065 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)617-6383

From:

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: linda.scarcelli@cnl.com

Foreign Limited Liability Company CNL Energy Fund Advisors, LLC

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$160.00 |

MAR - 5 2015

https://efile.sunbiz.org/scripts/efilcovr.exe

T. BROWN

3/4/2015

H15000056065 3

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

| CNL Energy Fund Advisors, LLC (Name of Foreign Limited Liability Comp | name must include "I imited II | ability Company " " I C " | OF 01 17 18 | |
|--|--|---|---|--|
| (Name of Poleign Limited Liability Com) | party, must merude Emmed En | ability Company, L.E.C., | or LLC.) | |
| (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) Upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 450 So. Orange Avenue | | | | |
| 2. Delaware | 3, 36-48043 | 46 | | |
| | nability | (FEI number, if app | icable) | |
| 4. Upon qualification | | | | |
| (Date first transac (See sections 605.09 | ated business in Florida, if prior 104 & 605.0905, F.S. to determine | to registration.) inc penalty liability) | | |
| 5. 450 So. Orange Avenue | | ··· | | |
| Orlando, FL 32801 | | | | |
| | (Street Address of Principal Of | ffice) | SS P | |
| 6. PO Box 4920 | | | | |
| Orlando, FL 32802 | | | 1.20 5.72.1 | |
| | (Mailing Address) | | D.C. | |
| 7. The name, title or capacity and address | s of the person(s) who h | nas/have authority to | manage is/are: | |
| Thomas K. Sittema, Manager, 450 So. Orange Av | renue, Orlando, FL 32801 | | | |
| | | | | |
| · · · · · · · · · · · · · · · · · · · | | | | |
| | | | | |
| 8. Attached is an original certificate of exi- | on under the law of whi | ch it is organized. (A | photocopy is not | |
| acceptable. If the certificate is in a foreign must be submitted) | language, a translation | or the certificate und | er oath of the translator | |
| <u> </u> | de OScar | uell | | |
| (in accordance with section 605.0203, F.S., the execution of the am aware that any false information submitted in a document | gnature of an authorized his document constitutes an affirman to the Department of State constitut | tion under the penalties of perju | try that the facts stated herein are true 1 ided for in s \$17.155, F.S.) | |
| Linda A. Scarcelli | | | | |
| Туро | ed or printed name of si | gnee | | |

H15000056065 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| CNL Energy Fund | the Limited Liability Advisors, LLC | Company is: | |
|--------------------|--|--|--------------|
| If unavailable, th | ie alternate to be used | d in the state of Florida is: | |
| 2. The name and | i the Florida street ad | Idress of the registered agent and office are; | |
| _ | Linda A. Scarcelli | | _ 10 5 7 |
| | | (Name) | |
| | 450 So. Orange Avenue | | · 2 1 |
| • | Florida St | reet Address (P.O. Box NOT ACCEPTABLE) | 1.20 |
| | Orlando | FL 32801 | 6 |
| - | | City/State/Zip | _ |

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 605, Florida Statutes.

By: John Scarcell.
(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CNL ENERGY FUND ADVISORS, 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 THIRTIETH DAY OF JANUARY, A.D. 2015.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CNL ENERGY FUND ADVISORS, LLC" WAS FORMED ON THE TWENTIETH DAY OF OCTOBER, A.D. 2014.

5623998 8300

150115468

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

AUTHENTY CATION: 2083086

DATE: 01-30-15