

Jun-28-04 3:36P

P.09

06/28/2004 15:41 FAX

Division of Corporations

0001

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

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.

((((H04000134590 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)205-0383

From: Eliza J. Bardin

Account Name : CNL FINANCIAL GROUP, INC.
Account Number : 113615003626
Phone : (407)650-1000
Fax Number : (407)650-1055

540-2699

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2004 JUN 28 P 3:37

FILED

FOREIGN LIMITED PARTNERSHIP

CNL Resort Arizona Holdings XI, LP

Certificate of Status	1
Certified Copy	1
Page Count	045
Estimated Charge	\$148.75

Name
Availability

Document
Examiner

Updater

Updater
Verifier

Document

Verifier

DCC

DCC

DCC

DCC

04 JUN 28 PM 3:45

04 JUN 28 PM 3:45

04 JUN 28 PM 3:45

TC
\$4,995.00

Jun-28-04 12:37P

P.10

06/28/2004 15:42 FAX

002

BO4000134590 3

**APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR
AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA**

1. CNL Resort Arizona Holdings XI, LP
(Name of limited partnership as it is in the home state)
2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida;
must contain the word "LIMITED" or "LTD.")
3. Delaware 4. 11-20-00
(State of Formation) (Date of Formation)
5. Linda A. Scarcelli
(Name of Registered Agent for Service of Process)
6. 450 S. Orange Avenue
(Street Address of Registered Office)
- Orlando Florida 32801
(City) (Zip Code)
7. Acceptance by the Registered Agent for Service of Process:
Linda A. Scarcelli
By: [Signature]
(Agent must sign on this line)
8. 450 S. Orange Avenue, Orlando, FL 32801
(Address of registered office required in state of formation or, if not required, address of principal office.)
9. NAMES OF GENERAL PARTNERS STREET ADDRESS
- CNL Resort Hospitality GP, LLC 450 S. Orange Avenue, Orlando, FL 32801
MO4000001645
10. 450 S. Orange Avenue, Orlando, FL 32801
(Office where Names, Addresses and Contributions of Limited Partners are kept.)
11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

Jun-28-04 12:37P

P.11

06/28/2004 15:42 FAX

0003

H04000134590 3

12 PO Box 4920, Orlando, FL 32801

(Mailing Address of Limited Partnership)

Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.

Signed this 23 day of June, 2004



General Partner

Barry A. N. Bloom as SVP of CNL Resort Hospitality GP, LLC as GP
STATE OF Florida

COUNTY OF Orange

On this 23 day of June, 2004

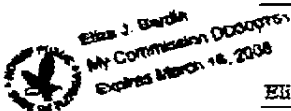
Barry A. N. Bloom, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____

2004 JUN 28 3:37
TALLAHASSEE
SECRETARY OF STATE

FILED





(Notary Public Signature)

Eliza J. Bardin
(Notary's Printed Name)

Seal My Commission Expires: _____

06/28/2004, 13:42 FAX

0004

H04000134590 3

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Barry A. N. Bloom, as SVP of CNL Resort Hospitality GP, LLC
a general partner of CNL Resort Arizona Holdings XI, LP, a (an) Delaware
limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 5000.00
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purposes of transacting business in Florida is \$ 4995.00

Under the penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct

Signed this 23 day of June, 2004



General Partner
Barry A. N. Bloom as SVP of CNL Resort Hospitality GP, LLC as GP

STATE OF Florida

COUNTY OF Orange

On this 23 day of June, 2004

Barry A. N. Bloom personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of _____


(Notary Public Signature)

Eliza J. Bardin
(Notary's Printed Name)

Seal My Commission Expires: _____

 Eliza J. Bardin
My Commission 00300751
Expires March 18, 2006

FILED
2004 JUN 28 P 3:37
TALLAHASSEE FL
SECRETARY OF STATE

Jun-28-04 12:37P

P.13

06/28/2004 15:42 FAX

0005

H04000134590 3

Delaware

PAGE 1

The First State

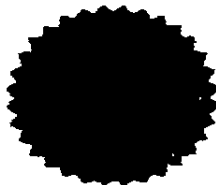
I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RESORT ARIZONA HOLDINGS XI, LP" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SECOND DAY OF APRIL, A.D. 2004.

2004 JUN 28 P 3:37
SECRETARY OF STATE
TALLAHASSEE, FL 32310

FILED

3318821 8300

040238299



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State
AUTHENTICATION: 3031912

DATE: 04-02-04

H040001345903