

CT CORPORATION SYSTEM

F01000002843

CORPORATION(S) NAME

CNLRS Equity Ventures, Inc.

FILED
01 MAY 29 PM 11 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

900004325519--0

05/29/01--01100--008
*****78.75 *****78.75

☒ Profit	☐ Amendment	☐ Merger
☐ Nonprofit		
☒ Foreign	☐ Dissolution/Withdrawal	☐ Mark
	☐ Reinstatement	
☐ Limited Partnership	☐ Annual Report	☐ Other
☐ LLC	☐ Name Registration	☐ Change of RA
☒ Certified Copy	☐ Fictitious Name	☐ UCC
	☐ Photocopies	☐ CUS
☐ Call When Ready	☐ Call If Problem	☐ After 4:30
☒ Walk-In	☐ Will Wait	☒ Pick Up
☐ Mail Out		

BK

Name _____
Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____

5/29/01

Order#: 4455879

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

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TALLAHASSEE, FLORIDA

1. CNLRs Equity Ventures, Inc.
(Name of corporation; must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. Maryland 3. Applied for
(State or country under the law of which it is incorporated) (FEI number, if applicable)
4. April 10, 2001 5. Perpetual
(Date of incorporation) (Duration: Year corp. will cease to exist or "perpetual")
6. Upon qualification
(Date first transacted business in Florida.) (SEE SECTIONS 607.1501, 607.1502 and 817.155, F.S.)
7. 450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336
P.O. Box 4920, Orlando, FL 32802-4920
(Current mailing address)
8. Owner/lessor of commercial real property
(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)
9. **Name and street address of Florida registered agent:** (P.O. Box or Mail Drop Box **NOT** acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida, 33324
(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System

PETER F. SOUZA
ASSISTANT SECRETARY

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors: (Street address **ONLY** - P.O. Box **NOT** acceptable)

A. DIRECTORS (Street address only - P.O. Box NOT acceptable)

Chairman: PLEASE SEE ATTACHED LIST

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

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TALLAHASSEE, FLORIDA

B. OFFICERS (Street address only - P.O. Box NOT acceptable)

President: PLEASE SEE ATTACHED LIST

Address: _____

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. K. B. Habicht

(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Kevin B. Habicht, Executive Vice President/Secretary/Treasurer

(Typed or printed name and capacity of person signing application)

05/09/2001

LIST OF OFFICERS & DIRECTORS

CNLRS EQUITY VENTURES, INC.

<u>Directors</u>	<u>Title</u>	<u>Address</u>
Kevin B. Habicht	Director	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336
Gary M. Ralston	Director	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336
Dennis E. Tracy	Director	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336

<u>Officers</u>	<u>Title</u>	<u>Address</u>
Douglas S. Grady	Senior Vice President	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336
Kevin B. Habicht	EVP/Secretary/Treasurer	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336
Dennis E. Tracy	President	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336
Julian A. Whitehurst	Assistant Secretary	450 S. Orange Avenue, Suite 900, Orlando, FL 32801-3336

STATE OF MARYLAND
Department of Assessments and Taxation

FILED
01 MAY 29 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

I, PAUL ANDERSON OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO THE FORFEITURE OR SUSPENSION OF CORPORATIONS, OR OF CORPORATIONS TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT CNLRS EQUITY VENTURES, INC. IS A CORPORATION DULY INCORPORATED AND EXISTING UNDER AND BY VIRTUE OF THE LAWS OF MARYLAND AND THE CORPORATION HAS FILED ALL ANNUAL REPORTS REQUIRED, HAS NO OUTSTANDING LATE FILING PENALTIES ON THOSE REPORTS, AND HAS A RESIDENT AGENT. THEREFORE, THE CORPORATION IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING WITH THIS DEPARTMENT AND DULY AUTHORIZED TO EXERCISE ALL THE POWERS RECITED IN ITS CHARTER OR CERTIFICATE OF INCORPORATION, AND TO TRANSACT BUSINESS IN MARYLAND.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND AT BALTIMORE ON THIS APRIL 19, 2001.

Paul B. Anderson

Paul B. Anderson
Charter Division

