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Division of Corporations
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To:

Division of Corporations

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: (850)205-03B3

From: Suzanne M. McLaughlin

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone : (407)650-1000 Fax Number : (407)650-1065

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## FOREIGN PROFIT QUALIFICATION

CNL WBR GP Corp.

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$87.50

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# 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.

natural person or partnership if not so contained in the	3, 59–3726323
(State or country under the law of which it is incorp	porated) (FEI number, if applicable)
June 18, 2001  (Date of incorporation)	5. Perpetual  (Duration: Year corp, will cease to exist or "perpetual")
	(======================================
Upon qualification	tion has not transacted business in Florida, insert "upon qualification.")
	is 607.1501, 607.1502 and 817.155, F.S.)
•	
450 S. Orange Avenue, Orlando I	
(Principa	al office address)
PO Box 4920, Orlando FL 32802-4	• = = -
	4920
	mailing address)
(Current	mailing address)
(Curent)  General partner of limited par	mailing address) rtnersh1p
(Current of Current of General partner of limited partner of Purpose(s) of corporation authorized in home	mailing address)  rtnership  ne state or country to be carried out in state of Florida)
(Current of Current of General partner of limited partner of Purpose(s) of corporation authorized in home	mailing address)  rtnership  te state or country to be carried out in state of Florida)
(Current)  General partner of limited partner of (Purpose(s)) of corporation authorized in home.  Name and street address of Florida register.	rtnersh1p  se state or country to be carried out in state of Florida)  red agent: (P.O. Box or Mail Drop Box NOT acceptable)
(Current of Current of General partner of limited partner of Purpose(s) of corporation authorized in home	rtnersh1p  se state or country to be carried out in state of Florida)  red agent: (P.O. Box or Mail Drop Box NOT acceptable)
(Current)  General partner of limited partner of (Purpose(s)) of corporation authorized in home.  Name and <u>street address</u> of Florida register	mailing address)  rtnership  te state or country to be carried out in state of Florida)
(Current)  General partner of limited partner of Purpose(s) of corporation authorized in home.  Name and <u>street address</u> of Florida register  Name: <u>C. Brian Strickland</u>	red agent: (P.O. Box or Mail Drop Box NOT acceptable)  AHASSE
General partner of limited partner of limited partner of limited partner of limited partner (Purpose(s) of corporation authorized in home Name and street address of Florida register  Name: C. Brian Strickland  ffice Address: 450 S. Orange Avenue  Orlando	rtnership ne state or country to be carried out in state of Florida) red agent: (P.O. Box or Mail Drop Box NOT acceptable): ALLAHASSEE , Florida 32801
General partner of limited partner of limited partner of limited partner of limited partners (Purpose(s) of corporation authorized in home.  Name and <u>street address</u> of Florida register  Name: <u>C. Brian Strickland</u> office Address: 450 S. Orange Avenue	red agent: (P.O. Box or Mail Drop Box NOT acceptable)  ALLAHASSEE  Florida 32801  (Zin code)
General partner of limited partner of limited partner of limited partner of limited partners (Purpose(s) of corporation authorized in home.  Name and street address of Florida register  Name: C. Brian Strickland  office Address: 450 S. Orange Avenue  Orlando  (City)	rtnership ne state or country to be carried out in state of Florida) red agent: (P.O. Box or Mail Drop Box NOT acceptable): ALLAHASSEE , Florida 32801
General partner of limited par (Purpose(s) of corporation authorized in home  Name and <u>street address</u> of Florida register  Name: C. Brian Strickland  ffice Address: 450 S. Orange Avenue  Orlando  (City)  C. Registered agent's acceptance:	rtnersh1p ne state or country to be carried out in state of Florida) red agent: (P.O. Box or Mail Drop Box NOT acceptable): AHASSEE, FLORPORATIO  , Florida 32801 (Zip code)  (Zip code)
General partner of limited par (Purpose(s) of corporation authorized in home  Name and street address of Florida register  Name: C. Brian Strickland  ffice Address: 450 S. Orange Avenue  Orlando  (City)  C. Registered agent's acceptance:  Eaving been named as registered agent and to a	red agent: (P.O. Box or Mail Drop Box NOT acceptable).  Plorida 32801  (Zip code)  Accept service of process for the above stated corporational the plants.
General partner of limited par (Purpose(s) of corporation authorized in home  Name and street address of Florida register  Name: C. Brian Strickland  ffice Address: 450 S. Orange Avenue  Orlando  (City)  C. Registered agent's acceptance:  Eaving been named as registered agent and to a cesignated in this application, I hereby accept the	rtnersh1p ne state or country to be carried out in state of Florida) red agent: (P.O. Box or Mail Drop Box NOT acceptable): AHASSEE, FLORPORATIO  , Florida 32801 (Zip code)  (Zip code)

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.

(Registered agent's signature)

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	a addresses of others and of differents.	
A. DIRECTORS	**SEE ATTACHED**	
hairman:		
Address:		
·		
Vice Chairman:		
Address:		
Director:		
Address:		
Director:		
Address:		
B. OFFICERS		
President:	**SEE ATTACHED**	
Address:		
		AL <sub>2</sub> ;
Vice President:		AHO JUN
		26 SSE
Secretary		RATION OR DA
		D O C
Address:		
7	ou may attach an addendum to the application listing a	dditional officers and/or directors.
13. <u>C-Buen</u>	ure of Chairman, Vice Chairman, or any officer listed	
14. C. Brian Str	ickland, SVP of Finance & Administrati	Lon

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

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#### CNL WBR GP CORP.

#### Directors:

James M. Seneff, Jr. 450 S. Orange Avenue Orlando FL 32801

Andrew L. Stidd 114 W. 47<sup>th</sup> Street, Suite 1715 New York NY 10036

Bernard J. Angelo 114 W. 47<sup>th</sup> Street, Suite 1715 New York NY 10036

#### Officers:

James M. Seneff, Jr. 450 S. Orange Avenue Orlando FL 32801 Chairman/Chief Executive Officer

Robert A. Bourne 450 S. Orange Avenue Orlando FL 32801 President/Treasurer

Lynn E. Rose 450 S. Orange Avenue Orlando FL 32801 Secretary

C. Brian Strickland 450 S. Orange Avenue Orlando FL 32801 Senior Vice President of Finance and Administration 2001 JUN 26 PM 3: 43
DIVISION OF CORPORATION
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### State of Delaware

# Office of the Secretary of State

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I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL WBR GP CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE NINETEENTH DAY OF JUNE, A.D. 2001.



Warriet Smith Hindson Harrier Smith Windson, Secretary of State

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AUTEENTICATION: 1196716

DATE: 06-19-01

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