Division

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0383 LINDA A. SCARCELLI

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626

: (407)650-1000

Phone Fax Number

: (407)650-1065

FOREIGN PROFIT QUALIFICATION

CNL Travel Services, Inc.

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.

1.	CNI, Travel Services, Inc. (Name of corporation; must include the word "INCORPORATION or abbreviations of like import in language as will cle natural person or partnership if not so contained in the name	arly	indicate that it is a corporation instead of a	<u> </u>	
2.	Delaware	3.	80-0023883		
٠.	(State or country under the law of which it is incorporated)		(FEI number, if applicable)		SEC
4.	11/9/01	5.	Perpetual		<u>≥</u> ?
	(Date of incorporation)		(Duration: Year corp. will cease to exist or "	pizpett	
6.	Upon qualification	<u> </u>		FEB	13S
	(Date first transacted business in Florida. If corporation has (SEE SECTIONS 607.150	1, 60	7.1502 and 817.155, F.S.)	Ecetion E	
7.			32801-3336 e address)		<u>>m</u>
	(Principal	DHIC	e address)		
	P. O. Box 4920, Orlando, FL 3280	2-4	920		
	(Current π	ıailir	ıg address)		
8. 9.	Investments (Purpose(s) of corporation authorized in home Name and street address of Florida registered agent:		or country to be carried out in state of Florida) O. Box or Mail Drop Box NOT acceptable)		
•	Name: Linda A. Scarcelli				
Of	fice Address: 450 So. Orange Avenue				
	Orlando, FL (City)	-	Florida 32801-3336 (Zip code)		
Ha des fur	Registered agent's acceptance: wing been named as registered agent and to accept serving been named as registered agent and to accept services and in this application, I hereby accept the appoint the agree to comply with the provisions of all statutes ties, and I am familiar with and accept the obligations of the accept the obligations of the accept	men rela of m	t as registered agent and agree to act in this tive to the proper and complete performance y position as registered agent.	сарас	tty. I
11.	Attached is a certificate of existence duly authenticated,	not	more than 90 days prior to delivery of this ap	plicatio	na 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.

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12. Names and business addresses of officers and/or directors:

A. DIRE	CTORS	
Chairman:	PLEASE SEE ATTACHED	
Address:		
		
Vice Chain	man:	≥ 8
Address:		
	02	E S
Director: _		
Address:	!	- FS
		TATE ORIU
Director: _		
Address:		
B. OFFI	CERS	
President:	PLEASE SEE ATTACHED	
Address:		
Vice Presid	Hent:	
Address:		
Secretary:		
Address:		•
Treasurer:		
Address:		-
	Enecessary, you may attach an addendum to the application listing additional officers and/or directors.	
•	A	
13	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)	
14	Tammie A. Quiglan, Vice President and Secretary	
	(Typed or printed name and capacity of person signing application)	

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CNL Travel Services, Inc.

The address for all officers and directors is:

450 So. Orange Avenue Orlando, FL 32801-3336

Directors Robert A. Bourne James M. Seneff, Jr.

Officers Thomas J. Hutchison, III C. Brian Strickland

Tammie A. Quinlan

<u>Title</u>

President and CEO

Executive Vice President and Treasurer

Vice President and Secretary

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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 "CNI. TRAVEL SERVICES, INC." IS DULY INCORPORATED UNDER THE HAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS ETECSTIC CORPORATED EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE ELEVENTH DAY OF DECEMBER, A.D. 2001

SECRETARY OF STATE ALLAHASSEE, FLORIDA



Harriet Smith Windson, Secretary of State

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AUTHENTICATION: 1495561

DATE: 12-11-01

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