Florida Department of State Division of Corporations

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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)540-2699

FOREIGN PROFIT QUALIFICATION

CNL First Merger GP Corp.

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

Electropic Flings hearts

Corporate Silver

Public Access title

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. CNL First Me	rger GP Corp.			
	corporation; must include "INCORPORATI Corp," "Inc," "Co," or "Corp.")	ed," "company,"	" "CORPORATION,"	
(If name unava	ilable in Florida, enter alternate corporate na	me adopted for the p	ourpose of transacting busin	iess in Florida)
2. Delaware		3. applied for		·
(State or countr	y under the law of which it is incorporated)	t	(FEI number, if applicable)	•
4. 07/19/04		5. perpetual	_	_ =
	te of incorporation)	(Duration: Yes	r corp. will cease to exist o	r "perpetual")
6. upon qualifica	tion			SEP DE
(Date first trans	acted business in Florida. If corporation has (SEE SECTIONS 607.1	not transacted busin 501, 607.1502 and 8	ess in Florida, insert "upon 17.155, F.S.)	→ C
7 450 S. Orange	Avenue, Orlando, FL 3801			로 중
/- <u></u>	(Principal office	address)		AH 8: 5
PO Box 4920.	Orlando, FL 32802			তা ই
	(Current mailing	address)		
	, –	-		
g General Partne	er of Limited Partnership			
(Purpose	e(s) of corporation authorized in home state of	er country to be carrie	d out in state of Fiorida)	
Q Name and ci	reet address of Florida registered ager	it: (P.O. Box or M	ail Drop Box NOT acce	ptable)
7, 11210c 200 <u>91</u>				*
Name:	Linda A. Scarcelli	· · · · · · · · · · · · · · · · · · ·	grand and the state of the stat	
Office Address:	450 S. Orange Avenue	<u> </u>	,	
			22801	
	Orlando (City)	, Plorida_	(Zip code)	
	(City)		(Enp and)	
Having been na designated in th further agree to	agent's acceptance: med as registered agent and to accept so is application, I hereby accept the appo- comply with the provisions of all statute ar with and accept the obligations of my	intment as register es relative to the pi	ed agent and agree to a coper and complete perf	et in this capacity. I
	Linda A. Scarcelli		,	

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)

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

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07/20/2004

Officer and Directors Address

CNL First Merger GP Corp.

Name

Title

Barry A.N. Bioom

Senior Vice President

Robert A. Bourne

Director

Treasurer

John A. Griswold

Director

President

Thomas J. Hutchison, III

Director

Chief Executive Officer

Chairman

Linda A. Scarcelli

Assistant Secretary

C. Brian Strickland

Executive Vice President

Secretary

Paul H. Williams

Senior Vice President

Business address for all officers and directors is

450 S. Orange Avenue Orlando, FL 32801 DIVISION OF CORPORATIONS

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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL FIRST MERGER 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 JULY, A.D. 2004.

DIVISION OF CORPORATIONS

ON STP-7 AM 8: 57



3830428 8300 040526253 Darriet Smita Hindson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3240468

DATE: 07-19-04