

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.

(((H05000274936 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : CNL FINANCIAL GROUP, INC.
Account Number : 113615003626
Phone : (407) 650-1000
Fax Number : (407) 540-2699

FOREIGN PROFIT QUALIFICATION

CNL Cypress Beneficiary Corp.

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$87.50

RECEIVED
05 NOV 30 PM 12:35
DIVISION OF CORPORATIONS

FILED
05 NOV 30 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

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 Cypress Beneficiary Corp.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION," "Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Delaware

(State or country under the law of which it is incorporated)

3. 20-3850100

(FEI number, if applicable)

4. November 14, 2005

(Date of incorporation)

5. perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. upon qualification

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 450 S. Orange Ave., Orlando, FL 32801

(Principal office address)

P.O. Box 4920, Orlando, FL 32802

(Current mailing address)

8. Real Estate Investment

(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 NOT acceptable)

Name: Linda A. Scarcelli

Office Address: 450 S. Orange Ave.

Orlando, Florida 32801

(City)

(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.


(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 business addresses of officers and/or directors:

FILED
05 NOV 30 AM 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. DIRECTORS

Chairman: _____

Address: _____

DIRECTOR --- Raymon Byron Carlock, Jr.Address: 450 S. Orange Ave.Orlando, FL 32801Director: Tammie A. QuinlanAddress: 450 S. Orange Ave.Orlando, FL 32801Director: Charles A. MullerAddress: 450 S. Orange Ave.Orlando, FL 32801**B. OFFICERS**President: Raymon Byron Carlock, Jr.Address: 450 S. Orange Ave.Orlando, FL 32801EXEC. Vice President: Charles A. MullerAddress: 450 S. Orange Ave.Orlando, FL 32801Secretary: Tammie A. QuinlanAddress: 450 S. Orange Ave., Orlando, FL 32801Treasurer: Robert A. BourneAddress: 450 S. Orange Ave., Orlando, FL 32801**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.13. 
(Signature of Director or Officer listed in number 12 of the application)14. Linda A. Scarcelli, Asst. Secretary

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

FILED
05 NOV 30 AM 10:28
SEPT. 30 OF STATE
TALLAHASSEE, FLORIDA

11/30/2005 13:39 FAX

004

**ADDENDUM TO APPLICATION
LIST OF ADDITIONAL OFFICERS**

CNL CYPRESS BENEFICIARY CORP.

Executive Vice President	Tammie A. Quinlan
Chief Financial Officer	Tammie A. Quinlan
Assistant Secretary	Linda A. Scarcelli

FILED

05 NOV 30 AM 10:28

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Delaware

PAGE 1

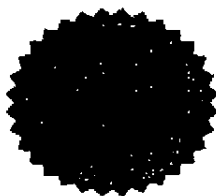
The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL CYPRESS BENEFICIARY 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 FOURTEENTH DAY OF NOVEMBER, A.D. 2005.

FILED

05 NOV 30 AM 10:28

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



4060321 8300

050924971

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4293406

DATE: 11-14-05