

**Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6381

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

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: amy.patterson@cni.com

**FOREIGN PROFIT/NONPROFIT CORPORATION
CNL Income TCV TRS Corp.**

Certificate of Status	1
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

3 Bunch JUN 21 2011



June 20, 2011

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CNL FINANCIAL GROUP, INC.

SUBJECT: CNL INCOME TCV TRS CORP.
REF: W11000033059

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

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Agnes Lunt
Regulatory Specialist II

FAX Aud. #: H11000161453
Letter Number: 611A00014868

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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. CNL Income TCV TRS 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. 45-2542482

(FEI number, if applicable)

4. June 10, 2011

(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 Avenue, Orlando, FL 32801

(Principal office address)

PO Box 4920, Orlando, FL 32802-4920

(Current mailing address)

8. owner of limited liability company interests

(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: Amy J. Patterson

Office Address: 450 S. Orange Avenue

Orlando

(City)

, Florida 32801

(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.

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

A. DIRECTORS

Chairman: PLEASE SEE ATTACHED

Address: _____

Vice Chairman: _____

Address: _____

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: PLEASE SEE ATTACHED

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. Amy J. Patterson

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 12 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

14. Amy J. Patterson, Assistant Secretary

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

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CNL INCOME TCV TRS CORP.

DIRECTORS:

<u>Name</u>	<u>Address</u>
R. Byron Carlock, Jr.	450 S. Orange Avenue, Orlando, FL 32801
Holly Greer	450 S. Orange Avenue, Orlando, FL 32801
Joseph T. Johnson	450 S. Orange Avenue, Orlando, FL 32801

OFFICERS:

<u>Name</u>	<u>Title</u>	<u>Address</u>
R. Byron Carlock, Jr.	President	450 S. Orange Avenue, Orlando, FL 32801
Holly Greer	Sr. Vice President Secretary	450 S. Orange Avenue, Orlando, FL 32801
Joseph T. Johnson	Sr. Vice President	450 S. Orange Avenue, Orlando, FL 32801
Kay Redlich	Sr. Vice President- Finance & Technology	450 S. Orange Avenue, Orlando, FL 32801
Robert A. Bourne	Treasurer	450 S. Orange Avenue, Orlando, FL 32801
Amy J. Patterson	Assistant Secretary	450 S. Orange Avenue, Orlando, FL 32801

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL INCOME TCV TRS 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 THIRTEENTH DAY OF JUNE, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE FRANCHISE TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CNL INCOME TCV TRS CORP." WAS INCORPORATED ON THE TENTH DAY OF JUNE, A.D. 2011.

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You may verify this certificate online
at corp.delaware.gov/authver.shtml



Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 8828436

DATE: 06-13-11

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