

10/24/11 15:35 FAX 850/650-543  
Division of Corporations001  
Page 1 of 1**F11000004263**

**Florida Department of State  
Division of Corporations  
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.**

(((H11000236158 3)))



H110002361583ABC.

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

**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

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: gilen.soto@cnl.com

**RECEIVED**  
**11 OCT 26 PM 05:58**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**FOREIGN PROFIT/NONPROFIT CORPORATION**

**CNL Income SL II TRS Corp.**

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$70.00

**FILED**  
**2011 OCT 24 AM 10:22**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**J. S. Myers OCT 25 2011**

[Electronic Filing Menu](#)

[Corporate Filing Menu](#)

[Help](#)

10/24/11 15:35 FAX 4078301343

CSS ADMIN

002

H110002361583

**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 SL II TRS Corp.  
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Int.," "Co.," or "Corp.")

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

2. Delaware 3. 45-2936072  
(State or country under the law of which it is incorporated) (FBI number, if applicable)

4. August 2, 2011 5. perpetual  
(Date of incorporation) (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  
(Current mailing address)

8. owning 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, 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.

H110002361583

FILED  
2011 OCT 24 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/24/11 15:35 FAX 4076501543

CSS ADMIN

0003

H110002361583

## 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

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

H110002361583

FILED  
2011 OCT 24 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10/24/11 13:35 FAX 4076301543

CSS ADMIN

0004

H110002361583

# Delaware

PAGE 1

*The First State*

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL INCOME SL II 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 SECOND DAY OF AUGUST, 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 SL II TRS CORP." WAS INCORPORATED ON THE SECOND DAY OF AUGUST, A.D. 2011.

FILED  
2011 OCT 24 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

5019120 8300

110881703

You may verify this certificate online  
at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)



Jeffrey W. Bullock, Secretary of State  
AUTHENTICATION: 8943212

DATE: 08-02-11

H110002361583

10/24/11 15:35 FAX 4076501543

CSS ADMIN

005

H110002361583

**CNL INCOME SL II TRS CORP. - Directors**

Greer, Holly	Director	450 S. Orange Avenue Orlando, FL 32801
Johnson, Joseph T.	Director	450 S. Orange Avenue Orlando, FL 32801
Yester, Sharon A.	Director	450 S. Orange Avenue Orlando, FL 32801

**FILED**  
2011 OCT 24 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H110002361583

10/24/11 13:35 FAX 4076601543

CSS ADMIN

0008

H110002361583

**CNL INCOME SL II TRS CORP. - Officers**

Bourne, Robert A.	Treasurer	450 S. Orange Avenue Orlando, FD 32801
Greer, Holly	Secretary, Senior Vice President	450 S. Orange Avenue Orlando, FL 32801
Johnson, Joseph T.	Senior Vice President	450 S. Orange Avenue Orlando, FL 32801
Mauldin, Stephen H.	President	450 S. Orange Avenue Orlando, FL 32801
Patterson, Amy J.	Assistant Secretary	450 S. Orange Avenue Orlando, FL 32801
Redlich, Kay S.	Senior Vice President Finance & Technology	450 S. Orange Avenue Orlando, FL 32801

**FILED**  
2011 OCT 24 AM 10:22  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H110002361583