

Division of Corporations

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Florida Department of State  
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To: Division of Corporations  
Fax Number : (850) 922-4003

From: Kyle L. WhiteJohnson  
Account Name : CNL GROUP, INC.  
Account Number : 113615003626  
Phone : (407) 650-1000  
Fax Number : (407) 650-1065

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**LIMITED LIABILITY COMPANY****CNL RESTAURANT INVESTORS, LLC**

Certificate of Status	1
Certified Copy	1
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ARTICLES OF ORGANIZATION  
OF  
CNL RESTAURANT INVESTORS, LLC

These Articles of Organization of CNL Restaurant Investors, LLC (the "Company"), are being duly executed and filed in order to form a limited liability company under the provisions of Section 608.408(3), Florida Statutes.

ARTICLE I - NAME

The name of the limited liability company is CNL Restaurant Investors, LLC.

ARTICLE II - ADDRESS

The mailing address of the limited liability company is P. O. Box 4920, Orlando, Florida 32802; and the street address of the principal office of the limited liability company is 450 South Orange Avenue, Orlando, Florida 32801.

ARTICLE III - REGISTERED AGENT & REGISTERED OFFICE

The address of its registered office in the State of Florida is 450 South Orange Avenue, Orlando, Florida 32801. The name of its registered agent at such address is Robert W. Chapin.

ARTICLE IV - MANAGEMENT

The management and affairs of the Company shall be conducted in accordance with the Operating Agreement of the Company adopted by the Members.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 11th day of May, 2000, and such execution constitutes an oath or affirmation, under the penalties of perjury, that, to the best of the authorized person's knowledge and belief, the facts stated therein are true.

CNL Restaurant Property Services, Inc.,  
a Delaware corporation, as Member

By: 


Robert W. Chapin, President

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**REGISTERED AGENT**

Having been named as registered agent and to accept service of process for CNL Restaurant Investors, LLC at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

  
\_\_\_\_\_  
Robert W. Chapin

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