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To:

Division of Corporations

Fax Number : (850)617-6383

From:

LINDA A. SCARCELLI

: CNL FINANCIAL GROUP, INC. Account Name

Account Number: 113615003626 : (407)650-1000 Phone Fax Number : (407)540-2699

LLC DISSOLUTION OR WITHDRAWAL CNL INCOME INVESTORS MEMBER, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF DISSOLUTION OF CNL INCOME INVESTORS MEMBER, LLC

The undersigned, being the sole manager of CNL INCOME INVESTORS MEMBER, LLC, a Florida limited liability company (the "Company"), hereby certifies as follows:

- 1. The name of the limited liability company is CNL INCOME INVESTORS MEMBER, LLC, a Florida limited company (the "Company").
- 2. The Articles of Organization of the Company were filed on February 27, 2008 and assigned Document No L08000020728.
- 3. The dissolution of the Company was duly authorized, consented to, and approved by the Mcmbers of the Company by a written consent dated as of December 29, 2014.
- 4. All debts, obligations and liabilities of the Company have been paid or discharged, or adequate provision has been made therefor pursuant to Florida Statutes.
- 5. All remaining property and assets of the Company have been distributed by the Company to the undersigned in accordance with the undersigned's right and interest in the Company.
 - 6. There are no suits pending against the Company in any court.

IN WITNESS WHEREOF, the under	ersigned has executed these Artic	les of Di	ss <mark>el</mark> ui	tion
on this 29 day of December, 2014.			30 }	
	SOLE MANAGER:	388 H	C 2:9	GENERAL ST
	a Florida corporation By Name: Linda A. Scarcelli	CORP.	PH 12: 45	
	Title: Secretary			