08/30/01 13:14 FAX 407 650 1065 Division of Corporations

CNL TAX ACCOUNTING

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### Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

AMY J. PATTERSON

Account Name : CNL FINANCIAL GROUP, INC.

Account Number: 113615003626 Phone: (407)650-1000

Fax Number : (407)650-1000 : (407)650-1065

AL

# FOREIGN LIMITED LIABILITY COMPANY

PH Hotel, LLC

Certificate of Status	1
Certified Copy	
Page Count	03
Estimated Charge	\$160.00

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:	
PH Hotel, LLC	
2. The name and the Florida street address of the registered agent and office are:	01
C. Brian Strickland	2
(Name)	AU6 30
450 S. Orange Avenue	
Florida street address (P.O. Box NOT ACCEPTABLE)	-
Orlando FL 32801-3336 City/State/Zip	
Having been named as registered agent and to accept service of process for the above stated lin liability company at the place designated in this certificate, I hereby accept the appointment as agent and agree to act in this capacity. I further agree to comply with the provisions of all state relating to the proper and complete performance of my duties, and I am familiar with and accept obligations of my position as registered agent as provided for in Chapter 608, F.S	registered
C. Brian Strickland	
C Brien Streeten	
\$ 100.00 Filing Fee for Application	

\$ 25.00 Designation of Registered Agent

5.00 Certificate of Status (optional)

\$ 30.00 Certified Copy (optional)

# APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

PH Hotel, L	LC	
	(Name of foreign limited liability company)	<del></del>
Dolaware	3 Applied for	
(Jurisdiction ) company is or	under the law of which foreign limited liability (FEI number, if applicable)	
August 28,		
	(Date of Organization) (Duration: Year limited liability company will exist or "perpetual")	cease to
Upon qualif		ŗ
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)	- <u>9</u> . 5
450 S. Oran	ge Avenue	)1 5 A
Orlando, FL	32801-3336	<del>ြက</del> ်
P*****	(Street address of principal office)	_ <b>O</b> [
	business addresses of the managing members or managers are as follows:	:
	nd Partners hip, LP	
450 S. Oran	ge Avenue	
Orlando, FL	.32801-3336	
	Mari T	
: Jurisciction ur	n original certificate of existence, no more than 90 days old, duly authenticated by the official having cust der the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang certificate under oath of the translator must be submitted.)	iody of recor
. Nature of	business or purposes to be conducted or promoted in Florida: Act as special member of	f
PH Hotel GP	LLC	
	C. Erian Strulle I	······································
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
	C. Brian Strickland	
	Typed or printed name of signee	•

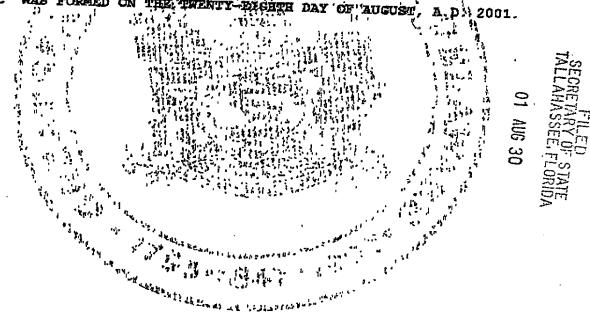
FLOS7 - 11/1/99 C T System Online

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### State of Delaware Office of the Secretary of State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "FH HOTEL, LLC" IS DULY FORMED UNDER IB\*IN, GOOD STANDING AND AS OF THE THENTY NINTE DAY OF AUGUST, A.D. 2001

AND I DO HEREBY FURTHER CERTIFY THAT THE SATOR





3430658 8300

010426844

AUTHENTICATION: 1319077

DATE: 08-29-01

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