#### Florida Department of State

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To:

Division of Corporations

Fax Number

: (850) 205-0383

From

SUZANNE M. MCLAUGHUN

Account Name : CNL FINANCIAL GROUP, INC.

Account Number: 113615003625

Phone :

: (407)650-1000

Fax Number

(407) 650-1065

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VISION OF DURPORATI

FOREIGN LIMITED LIABILITY COMPANY

Single Solution 109, LLC

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

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

IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Single Solution 109, LLC
(Name of foreign limited liability company)
Delaware  3. N/A (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)
10/11/2002 5. Perpetual (Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
Upon qualification  (Date lirst transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
450 C. Oranga Avanua, Orlanda El 20004
(Street address of principal office)
(Street address of principal office)
If limited liability company is a manager-managed company, check here 🗹 . SS
The name and usual business addresses of the managing members or managers are as follows:
CNL Management Corp., 450 S. Orange Avenue, Orlando FL 32801
. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
. Nature of business or purposes to be conducted or promoted in Florida: Manage real
estate investment
Keller &
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 penaltics of perjury that the facts stated herein are true.)

Robert A. Bourne, President of CNL Management Corp.

Typed or printed name of signee

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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.

Single Solution 109, LLC	Company is:	_
2. The name and the Florida street as	ddress of the registered agent and office are:	
Linda A. Scarcel	Ī	100 A
(Name)		FILE HASSE
450 S. Orange A	venue	SEE. PR
Florida street address (P.O. Box NOT ACCEPTABLE)		Es w
Orlando	<sub>ਸਾ</sub> 32801	NATE CARIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company 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, F.S.

(City/State/Zip)

Jane G. Searcoll.

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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PAGE

# **Delaware**

#### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SINGLE SOLUTION 109, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTEENTH DAY OF MARCH, A.D. 2003.

AND I DO HEREST FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

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Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2314459

DATE: 03-18-03