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To:

Division of Corporations

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From:

SUZANNE M. McLAUGHLIN

: CNL FINANCIAL GROUP, INC. Account Name

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

Fax Number : (407)650-1065

FOREIGN LIMITED LIABILITY COMPANY

CNL HHC III, LLC

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

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12/5/2003

## 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:

	CHE ANGELLIA		
1.	CNL HHC III, LLC (Name of foreign limited liability o	ompany)	
2.	Delaware Jurisdiction under the law of which foreign limited liability company is organized)	FEI number, if applicable)	-
4.	12/02/2003 5. Perpetual (Date of Organization) (Duration: \( \frac{1}{2} \)	Year limited liability company will cease to exist or "perpetual")	
6.	Upon qualification (Date first transacted business in Florida. (See sections 608.50)	1, 608.502, and 817.155, F.S.)	
7.	450 \$. Orange Avenue, Orlando FL 32801	SECR	03 DE
8.	(Street address of principal office If limited liability company is a manager-managed company, che		C-5 PM (
9.	The name and usual business addresses of the managing member John A. Griswold, 450 S. Orange Avenue, Orlando FL 32801	s or managers are as follows:	3: 50
	Thomas J. Hutchison iii, 450 S. Orange Avenue, Orlando FL 32801	Ken sizzaje	
			•
10	Attached is an original certificate of existence, no more than 90 days old, duly a the jurisdiction under the law of which it is organized. (A photocopy is not a translation of the certificate under oath of the translator must be s	cceptable. If the certificate is in a foreign lan	ecords in guage, a
11	Nature of business or purposes to be conducted or promoted in partnership	Plorida: General partner of limited	
	Signature of a member or an authorized repre- (in accordance with section 608.408(3), F.S., the execution an affirmation under the penalties of perjury that the facts st	of this document constitutes	
	Thomas I, Hutchison III, Manager	d .	

Typed or printed name of signee

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H03000330129 3

## 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	Y immies	ATIA	Liliter	Company	3
1.	ine name	or me	Limite	$a_{1.12}$	$\mathbf{n}\mathbf{m}\mathbf{v}$	Company	15.

CNL HHC III, LLC

2. The name and the Florida street address of the registered agent and office are:

Linda A. Scarcelli		1	
	(Name)	. 1	
	_	***	
450 S. Orange Aver		4	
Flor	da street address (P.O. Box I	OT ACCEPTABLE)	
Orlando	FL	32801	
	(City/State/Zip)		
	,	4	
		3	
		Ą	

03 DEC -5 PH 3: 50

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.

By: Jing Scarcell (Spotting)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

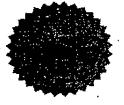
\$ 5.00 Certificate of Status (optional)

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## Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL HHC III, 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 SECOND DAY OF DECEMBER, A.D. 2003.



Harriet Smith Windsor, Secretary of State

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AUTHENTICATION: 2781216

DATE: 12-02-03

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