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ODivision of Corporations

Fax Number Eliza J. Bardin (850)205-0383

9. trõg:

Account Name : CNL

: CNL FINANCIAL GROUP, INC.

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

FOREIGN LIMITED LIABILITY COMPANY

CNL Resort Junior Mezz GP, LLC

Certificate of Status	1
Certified Copy	1
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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:

CNL Resort Junior M			of the Comment
	(Name of Foreign Lin		
Delaware			applied for
(Jurisdiction under the l company is organized)	ew of which foreign limited liab	oility	(FEI number, if applicable)
8/10 /04		5.	perpetual
(Date of	Organization)	•	(Duration: Year limited liability company will cease to exist or "perpetual")
upon qualification			
	(Date first transacted business (See sections 608.501 & 608.50	in Flor 2 F.S.	rida, if prior to registration.) to determine penalty liability)
450 S. Orange Avens	ue, Orlando, FL 32801		
•			3
-			6n · 1 / 1 / 1 / 1
	(Street Ac	igress o	of Principal Office)
If limited lightlity of	company is a manager-man	soed o	
II Illinou nuonney	Mightiy is a manager (in)	m [®] Adr .	company, oncon new &
The name and usua	l business addresses of the	mana	ging members or managers are as follows:
			, .
Please s	see attached		
			•
	MAN		
	•		
). Attached is an original o	ertificate of existence, no more th	an 90 da	ays old, duly authenticated by the official having custody of records
			is not acceptable. If the certificate is in a foreign language, a
nslation of the certificate	under oath of the translator must b	esibin	itted.)
. Nature of busines	s or purposes to be conduc	ted or	promoted in Florida: General Partnership of
Limited Partnership			· · · ·
	250		
	Signature of a member or	an aut	horized representative of a member.
	(In accordance with section 608.40	8(3), F.S	S., the execution of this document constitutes ry that the facts stated herein are true.)
	Barry A.N. Bloom Seve	DZ.	Vict President
	Typed or pr	rinted	name of signee

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.

of the Limited Liability	Company is:						
CNL Resort Junior Mezz GP, LLC							
and the Florida street add	lress of the registered agent and office are:						
Linda A. Scarcelli		- *					
	(Name)	Of I					
450 S. Orange Avenue	uni de la compania d	AUG DE THE					
Florida Street Address (P.O. Box NOT ACCEPTABLE)							
Ortando	FL 32801 City/State/Zip	AH 9: 45					
	and the Florida street add Linda A. Scarcelli 450 S. Orange Avenue Florida Street	Linda A. Scarcelli (Name) 450 S. Orange Avenue Florida Street Address (P.O. Box NOT ACCEPTABLE) Orlando FI. 32801					

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, Florida Statutes.

Signature)

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

H04000165723 3 08/09/2004

CNL Resort Junior Mezz GP, LLC

Board of Managers	Title	
Matthew M. Dorr	Independent Manager	445 Broad Hollow Rd, Melville, NY 11747
Barry A.N. Bloom	Manager 450 S. O	range Avenue, Orlando, FL 32801
John A. Griswold	Manager 450 S. C	Frange Avenue, Orlando, FL 32801
Paul H. Williams	Manager 450 S. C	range Avenue, Orlando, FL 32801

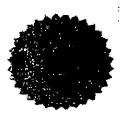
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL PESORT JUNIOR MEZZ GP, LLC" IS DULY FORMED DINDER 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 TENTH DAY OF AUGUST, A.D. 2004.



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AUTHENTICATION: 3287907

DATE: 09-10-04