

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CNL Resort Intermediate Mezz GP, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Barker
Name of Person

Pyramid Advisors LLC
Firm/Company

One Post Office Square Suite 3100
Address

Boston, MA 02109
City/State and Zip Code

mbarker@pyramidhotelgroup.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Olga Hinkel at (800) 225-2034
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: CNL Resort Intermediate Mozz GP, LLC
2. Jurisdiction of its organization: Delaware
3. Date authorized to do business in Florida: 08/12/2004

SECTION II (4-7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 07/14/2008
5. New name of the limited liability company: _____
(must end with "Limited Liability Company," "L.L.C.," or "LLC.")
MSR Resort Intermediate Mozz GP, LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.C.," or "LLC.")
6. If the amendment changes the period of duration, indicate new period of duration:
n/a
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:
n/a
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:
n/a
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Signature of a member or the authorized representative of a member

Christopher Devine
Vice President

Typed or printed name of signer

Filing Fee: \$25.00

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATION
10 MAY 13 AM 9:17

Delaware

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The First State


I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID "CNL RESORT INTERMEDIATE MESH GP, LLC", FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "MSR RESORT INTERMEDIATE MESH GP, LLC", THE FOURTEENTH DAY OF JULY, A.D. 2008, AT 4:42 O'CLOCK P.M.

3840915 8320

100500987

You may verify this certificate online
at corp.delaware.gov/authver.shtml




Jeffrey W. Bullock, Secretary of State
AUTHENTICATION: 7989713

DATE: 05-12-10