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Division of Corporations

Fax Number : (850)205-0383

Eliza J. Bardin

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone (407) 650-1000

(407) 540-2699

FOREIGN LIMITED LIABILITY COMPANY

CNL Resort Sub Senior Mezz GP, LLC

Certificate of Status	1	
Certified Copy	1	
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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: 1 CNL Resort Sub Senior Mezz GP, LLC (Name of Foreign Limited Liability Company) 2. Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) 4. 8/10/04 perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") upon qualification (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 450 S. Orange Avenue, Orlando, FL 32801 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here 🔀 9. The name and usual business addresses of the managing members or managers are as follows: Please see attached 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the bertificate is in a fiveligh language, a translation of the certificate under oath of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: General Partnership of Limited Partnership

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 perjuty that the facts stated herein are true.)

Typed or printed name of signee

Barry A.N. Bloom

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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

I. The name of the Limited Liability Company is: CNL Resort Sub Senior Mezz GP, LLC			
	<u> </u>		. Sec. 01
2. The name	and the Florida street ad	dress of the registered agent and office are	&1 P3
	Linda A. Scarcelli		
		(Name)	_
	450 S. Orange Avenue		A AUG
	Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	12 07
	Orlando	FI 32801	
		City/State/Zip	AN IO:
		,	무 말"

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.

\$ 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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CNL Resort Sub Senior Mezz GP, LLC

Board of Managers Title

Independent Manager 445 Broad Hollow Rd, Melville, NY 11747 Denise M. Veidt

450 S. Orange Avenue, Orlando, FL 32801 Barry A.N. Bloom Manager John A. Griswold Manager 450 S. Orange Avenue, Orlando, FL 32801 Paul H. Williams Manager 450 S. Orange 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 RESORT SUB SENIOR MEZZ GP, 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 TENTH DAY OF AUGUST, A.D. 2004.

DIVISION OF CORPORATIONS



Darriet Smita Hindan

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 3287902

DATE: 08-10-04

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