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To:

Division of Corporations

Fax Number : (850) 205-0383

Eliza J. Bardin

From:

Account Name : CNL HOTELS & RESORTS, INC.

Account Number : I20050000020

Phone

(407) 650-1549

Fax Number

: (407)540-2699

FOREIGN LIMITED LIABILITY COMPANY

CNL Claremont INT Mezz GP, LLC

Certificate of Status	1
Certified Copy	1
Page Count	84
Estimated Charge	\$160.00

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

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

D -1	(Name of Foreign Limited	LI	omiy Company)
Delaware		3	applied for
	law of which foreign limited liability		(FEI number, if applicable)
3/16/05		5	perpetual
(Date of	Organization)	٠,	(Duration: Year limited liability company will cease to exist or "perpetual")
upon qualification			
	(Date first transacted business in F (See sections 608.501 & 608.502 F.	lori S. t	da, if prior to registration.) o determine penalty liability)
450 S. Orange Avenue	e, Orlando, FL 32801		
	(Street Addres	e of	Principal Office)
	(0304714411	~	A Imorbia Caroo)
If limited liability	company is a manager-manage	ďo	ompany, check here 🗷
7116	al bushess addresses affabr and		
. Ine name and usus	at business addresses of the ma	пар	ring members or managers are as follows:
Please see attached.	_		
		··-	
			ys old, duly authenticated by the official having custody of roo
e jurisdiction under the la	aw of which it is organized. (A photoco	yyy i	snot acceptable. If the certificate is in a foreign language, a
e jurisdiction under the la		yyy i	snot acceptable. If the certificate is in a foreign language, a
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e jurisdiction under the last statement of the certificate 1. Nature of business	sw of which it is organized. (A photococumier cath of the translator must be said as or purposes to be conducted of Signature of a member or an a (In accordance with section 608.408(3),	or I	stotacceptable. If the octificate is in a foreign language, a need.) promoted in Florida: General Partner of Limited corized representative of a member. the execution of this document constitutes
ne jurisdiction under the le austration of the certificate 1. Nature of busines	aw of which it is organized. (A photococumier cells of the translator must be said as or purposes to be conducted of Signature of a member or an a	or puth	stoctacceptable. If the octificate is in a foreign language, a need.) promoted in Florida: General Partner of Limited corized representative of a member. the execution of this document constitutes that the facts stated herein are true.)

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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.	E T						
1. The name of the Limited Liability Company is:	至						
CNL Claremont INT Mezz GP, LLC	5						
2. The name and the Florida street address of the registered agent and office are:	ħ						
Stephanie J. Thomas							
(Name)							
•							
450 S. Orange Avenue							
Florida Street Address (P.O. Box NOT ACCEPTABLE)							
· — · · · · · · · · · · · · · · · · · ·							
Orlando FT 32801							
City/State/Zip							
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 registere 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. Stephanie J. Thomas By: (Signature)	:d						

\$ 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 CLAREMONT INT MEZZ GP, LLC

John A. Griswold, Manager 450 S. Orange Avenue, Orlando, FL 32801

C. Brian Strickland, Manager 450 S. Orange Avenue, Orlando, FL 32801

Barry A.N. Bloom, Manager 450 S. Orange Avenue, Ovlando, FL 32801

Michael K. Seitz, Independent Manager 445 Broad Hollow Road, Melville, NY 11747



Delaware

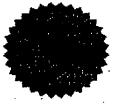
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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL CLAREMONT INT 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 SIXTEENTH DAY OF MARCH, A.D. 2005.

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DIYLLICK OF CORPORATIONS



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AUTHENTICATION: 3747373

DATE: 03-16-05