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SECRETARY OF STATE TALLAHASSEE. FLORIDA

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: CNL FINANCIAL GROUP, INC.

Phone

Account Number : 113615003626

1 (407)650-1000

Fax Number

: (407)540-2699

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### CNL Income Ski Holding, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

H06000146991 3

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TRANSACT BUSIN	IESS IN FLORIDA  SECRETARY OF
IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE ST	THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
1. CNL Income Ski Holding, LLC	
(Name of Foreign Limited Lia	bility Company)
Delaware     (Jurisdiction under the law of which foreign limited liability company is organized)  3.	pending (FEI number, if applicable)
4. May 25, 2006 (Date of Organization) 5.	perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6. upon qualification  (Date first transacted business in Florid (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)
7. 450 S. Orange Avenue	
Orlando, FL 32801 (Street Address of	Principal Office)
8. If limited liability company is a manager-managed or	ompany, check here 🗸
9. The name and usual business addresses of the manag	ing members or managers are as follows:
please see attached	
10. Attached is an original certificate of existence, no more than 90 day the jurisdiction under the law of which it is organized. (A photocopy is translation of the certificate under eath of the translator must be submit	snot acceptable. If the certificate is in a foreign language, a
11. Nature of business or purposes to be conducted or p	romoted in Florida: Holding Company
Signature of a member or an author (in accordance with section 608.408(3), F.S. an affirmation under the penaltics of perjury Linda A. Scarcelli, Asst. Se	that the facts stated herein are true.)

Typed or printed name of signee

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2006 MAY 31 P 12: 17

# REGISTERED AGENT/REGISTERED OFFICEALLAHASSEE, FLORIDA CERTIFICATE OF DESIGNATION OF

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE

UNDERSIGNED LIMITED LIABILITY COMPANY S	ODBMITS THE LOTTO A THAT STATEMENT
TO DESIGNATE A REGISTERED OFFICE AND REC	SISTERED AGENT IN THE STATE OF
FLORIDA.	

1. The name of the Limited Liability Company is:

CNL Ir	ncome	Ski	Holding	g, I	LLC
--------	-------	-----	---------	------	-----

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

Linda A. Scarcelli	
	(Namc)
450 S. Orange A	ve.
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Orlando	FL 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 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.

> Filing Fee for Application \$ 100.00

25.00 Designation of Registered Agent

Certified Copy (optional) 30.00

5.00 Certificate of Status (optional)

H06000146991 3

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## CNL Income Ski Holding, LLC

<u>Manager</u>	Address SECRETARY
Raymon Byron Carlock, Jr.	SECRETARY OF STATE 450 S. Orange Ave., Orlando, FL 32804-AHASSEE, FLORIDA
Charles A. Muller	450 S. Orange Ave., Orlando, FL 32801
Tammie A. Quinlan	450 S. Orange Ave., Orlando, FL 32801
Kevin Burne	445 Rmad Hollow Road, Suite 239, Melville, NY, 11747

# Delaware

PAGE 1

## The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL INCOME SKI HOLDING, 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 TWENTY-SIXTH DAY OF MAY, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Varriet Smith Hime Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 4776456

DATE: 05-26-06

H06000146991 3

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