

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

LINDA A. SCARCELLI

Account Name

: CNL FINANCIAL GROUP, INC.

Account Number : 113615003626

: (407)650-1000

Fax Number

: (407)540-2699

FLORIDA/FOREIGN LIMITED LIABILITY C					
CORPOR	CNL Land Develop	ment I, LLC	4-5		
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10/20/2006

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 LIBILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. CNL Land Development i, LLC			
(Name of Foreign Limited Liability Company)			
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. 37-1530463 (FEI number, if applicable	37-1530463 (FEI number, if applicable)		
4. 10/4/06 (Date of Organization) 5. (Duration; Year limited liability comparexist or "perpetual")	y will cease to		
6. Upon qualification	~		
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 P.S. to determine penalty liability)	E 2		
7. 450 South Orange Avenue, Orlando, FL 32801-3336			
V C	78. 79. 15. 15. 15. 15. 15. 15. 15. 15. 15. 15		
(Street Address of Principal Office)			
8. If limited liability company is a manager-managed company, check here	TATES 4		
9. The name and usual business addresses of the managing members or managers are as for	JM —		
CNL Land Development I Member, LLC, 450 So. Orange Avenue, Orlando,	FL 32801		
	<u> </u>		
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a forest translation of the certificate under eath of the translator must be submitted.)	ng custody of records in gn language, a		
,	lambar of LLC		
11. Nature of business or purposes to be conducted or promoted in Florida: Managing M	IGITIDGE OF TEC		
Signature of a member or an authorized representative of a member. (In sectordance with section 608.408(3), F.S., the execution of this document constitutes	•		
an affirmation under the penalties of perjury that the facts stated herein are true.)			
Linda A. Scarcelli			

Typed or printed 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.

1. The name of the Limited Liability Company is:

CNL Land Development I, LLC

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

Linda A. Scarcelli	. #	~ .	
(Name)	LEC	200 b	
450 So. Orange Avenue	RETA	130	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	ഗയ	20	
Orlando, FL 32801-3336 _{FL}	OF S	Þ	
City/State/Zip	PAIL	ے ث	
	A	Ξ	

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.

Sad OSCarcell.
(Signature)

\$ 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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Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL LAND DEVELOPMENT I, 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 FOURTH DAY OF OCTOBER, A.D. 2006.

2006 OCT 20 A 9: 45
SECRETARY OF STATE

4229993 8300

060912322

Warriet Smila Handson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5089813

DATE: 10-04-06

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