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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Eliza J. Bardin

Account Name : CNL HOTELS & RESORTS, INC.

Account Number : I20050000020 Phone : (407)650-1549 Fax Number : (407)540-2702

NEC 19 PH 3: 37

HASSEE, E ORIG

LORIDA/FOREIGN LIMITED LIABILITY CO.

CNL Resort Junior MREP, LLC

Certificate of Status	0
Certified Copy	1
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA-

[CNL Resort Junior M							
,	(Name of Foreign	n Limited Liabil	ity Company)				
2. Delaware		3, 0	-0879697				
(Jurisdiction under the company is organized)	law of which foreign limited	d liability	(FEI aum	nber, if applicable	c)		
4, 12/14/2006			erpetual				
(Date o	f Organization)		Duration: Year limite exist or "perpetual")	d liability compa	my will ceas	se to	
6. upon qualification					<u> </u>	- 8:	
	(Date first transacted bus (See sections 608.50) & 6	iness in Florida 08.502 F.S. to d	if prior to registration etermine penulty liabi	n.) lity)	V(77)	S DEC	
7, 420 S. Orange Ave., S	Sie 700				<u> </u>	<u>6</u>	~17.
Orlando, FL 32801					SEE. O. A.S.		
	(Stre	et Address of P	incipal Office)		 .:	9:	_
8. If limited liability	company is a manager-	managed con	npany, check here	K	STATE	: 12	
9. The name and usu	al business addresses o	f the managin	g members or mar	nagers are as fe	ollows:		
Please see attached	•						
	· · · · · · · · · · · · · · · · · · ·						
				<u> </u>			
custody of records in th	nal certificate of existence, e jurisdiction under the lay ge, a translation of the c	v of which it is	organized. (A phot	ocopy is not acc	cptable, If	the cert	ìficate
II. Nature of busines	ss or purposes to be con	ducted or pro	moted in Florida:	_ Mortgag	e fina	ņce	
	TRM					_ •	
٠	Signature of a member (In accordance with section 60 an affirmation under the pena	08.408(3), F.S., th	e execution of this docu	ment constitutes			
	Stephanic J Thomas, Assis			• •			

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.

CNL Resort Junior MREP, LLC		
2. The name and the Florida street address of the registered agent and office are:	DEC	~~
Stephanie J. Thomas	jri_	E
(Namo)	FLOOR SE	
420 S. Orange Ave., Ste 700	9: 12 PAIDA	
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.

Stephanie J. Thomas

(Signature)

1. The name of the Limited Liability Company is:

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Attachment: CNL Resort Junior MREP, LLC

9.

Barry A.N. Bloom
John A. Griswold
C. Brian Strickland
John L. Fridlington

420 S. Orange Ave., Ste 700, Orlando, FL 32801
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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 RESORT JUNIOR MREP, 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 FOURTEENTH DAY OF DECEMBER, A.D. 2006.

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



Harriet Smith Windson, Secretary of State

AUTHENTICATION: 5280098

DATE: 12-14-06

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