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To:

Division of Corporations

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From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626

: (407)650-1000

Phone Fax Number

: (407)540-2699

FLORIDA/FOREIGN LIMITED LIABILITY CO

Grapevine Golf, L.L.C.

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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. GRAPEVINE GOLF, L.L.C. (Name of Foreign Limited Liability Company) 2. DELAWARE (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized) perpetual (Duration: Year limited liability company will cease to (Date of Organization) exist or "perpetual") 6. 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: Raymon Byron Carlock, Jr. - 450 S. Orange Ave., Orlando, FL, 32801 Charles A. Muller - 450 S. Orange Ave., Orlando, FL 32801 Tammle A. Quinlan, 450 S. Orange Ave., Orlando, FL 32801; Amy Sinelli, 450 S. Orange Ave., Orlando, FL 32801 10. Attached is an original cartificate 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 certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted.) 11. Nature of business or purposes to be conducted or promoted in Florida: To engage in any lawful act or activity for which a limited liability company may under the laws of FL. 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 perjury that the facts stated herein are true.)

Typed or printed name of signee

Linda A. Scarcelli

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.

2. The name a	and the Florida street addr	ess of the regist	ered agent and office	e are:	٠.,	
n 1	Lìnda A. Scarcelli		20 May 1992			
• •	*	(Name)				
	450 S. Orange Ave	e.,				
•	Florida Street	Address (P.O. Box	NOT ACCEPTABLE)	TALI	O7 SE	
.*	Orlando	FL	32801	AHA	APR 30	1
		City/State	/Zip	SSEL	30	-
liability compa agent and agre relating to the	amed as registered agent a my at the place designated te to act in this capacity. I proper and complete perfo my position as registered a	in this certificate further agree to rmance of my du	e, I hereby accept the comply with the prov tties, and I am familia	appointment us i isions of all statu ir with and accep	registered tes 2	

\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GRAPEVINE GOLF L.L.C." 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-SEVENTH DAY OF APRIL, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

O7 APR 30 AM 10: 24
SECRETARY OF STATE
TALL AHASSEF FLORIDA

3072745 8300 070490846



Daniel Smile Mindson

AUTHENTICATION: 5632592

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DATE: 04-27-07