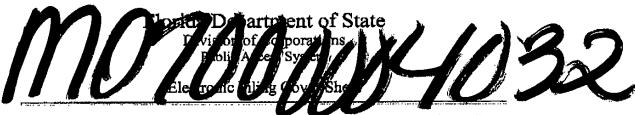
Page 1 of 1



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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name C T CORPORATION SYSTEM

Account Number FCA000000023 (850)222-1092 Phone Fax Number (850) 878-5926

FLORIDA/FOREIGN LIMITED LIABILITY CO

CP Sanibel Fee Owner, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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https://efile.sunbiz.org/scripts/efilcovr.exe

7/5/2007

CI CORP

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

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

risdiction under the law of which foreign limited liability (FEI number, if applicable) upony is organized)	opy of the written ited Liability
elaware 3. applied for urisdiction under the law of which foreign limited liability (FEI number, if applicable) unpany is organized)	
urisdiction under the law of which foreign limited liability (FEI number, if applicable) ompany is organized)	
6/27/07 5. perpetual	
(Date of Organization) (Duration: Year limited liability company will exist or "perpotual")	cease to
	11 W. 1209
(Date first transacted business in Florids, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	
2390 E. Camelback Road, Snite 325	
	
"Macric, AZ 85016 (Street Address of Principal Office)	- 26- 0
	7 J EC
If limited liability company is a manager-managed company, check here	
The name and usual business addresses of the managing members or managers are as follows	-5 ASS
National Safe Harbor Exchanges	F71
	Fig. A
2390 Camelback Road, Suite 325	15 DE 10 CO
Phoenix, AZ 85016	D.F. 20
	<u> </u>

01/02/2007 16:10 8502227615

FLOST - 06/28/2007 C T Hysters Quiting

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 Li	mited Liability Company is:	
CP Sanibal Fee Owner, LL	<u>c</u>	
If name unavailable, t	he alternate name to be used in the state of Florida is:	
2. The name and the I	Florida street address of the registered agent and office are:	07 SE
	C T Corporation System	LECKH!
	(Name) 1200 South Pine Island Road	-5 A
	Florida Street Address (P.O. Box NOT ACCEPTABLE)	
	Plantation FL 33324	IO: 29: STATE FLORIDA
	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.

By: Carol Carporation System

(Storature)

By: Carol Glorature)

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

71,057 - 06/21/2007 C T Byston Colins



D 2 (21)

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CP SANIBEL FEE OWNER, 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-EIGHTH DAY OF JUNE, A.D. 2007.

SECRETARY OF STATE

4379698 8300 070759483



Daniel Smile Minden

Harriet Smith Windson, Secretary of Star

+ CARLICAT. 3001990

DATE: 06-28-07