Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 : (407)650-1000 Phone

Fax Number (407)540-2699

ORIDA/FOREIGN LIMITED LIABILITY CO.

CNL Income Eagle Cove Marina, LLC

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

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the isent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabimpany," "L.L.C.," "LLC.") Delaware [July 3, 2007 [Date of Organization] [Duration: Year limited liability company will cease to exist or "perpetual") 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	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C." or "LLC.") name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab manager" (FEI number, if sphiloable) Delaware July 3, 2007 (Date of Organization) (Date of Organization) (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) If limited liability company is a manager-managed company, check here (Street Address of Principal Office) Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of the sent and usual business of existence, no more than 90 days old, duly authenticated by the official having custody of the sent and usual business and resistance, no more than 90 days old, duly authenticated by the official having custody of the sent and usual business and resistance, no more than 90 days old, duly authenticated by the official having custody of the sent and usual business and resistance, no more than 90 days old, duly authenticated by the official having custody of the sent and usual business.	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the sent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liab memory," "L.L.C.," "L.C.," "L.C.") Delaware July 3, 2007 (Date of Organization) (Date of Organization) (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) If limited liability company is a manager-managed company, check here (Street Address of Principal Office) Attached is an original certificate of coistence, no more than 90 days old, duly authenticated by the official having custody of rejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a		C		
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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 Income Eagle Cove Marina, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Linda A. Scarcelli	
(Name)	·
450 S. Orange Avenue	•
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Orlando FL	
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.

(Signature)

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

• CNL Income Eagle Cove Marina, LLC - SPE

Manager Title Address
Raymon Byron Carlock, Jr. Manager 450 S Orange Ave., Orlando, FL 32801
Charles A. Muller Manager 450 S Orange Ave., Orlando, FL 32801
Tammie A. Quinlan Manager 450 S Orange Ave., Orlando, FL 32801

Bernard J. Angelo Independent Manager 445 Broad Hollow Road, Suite 239, Meiville, NY 11747
Tony Wong Independent Manager 445 Broad Hollow Road, Suite 239, Meiville, NY 11747

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HERBY CERTIFY "CNL INCOME EAGLE COVE MARINA TRS CORP." IS DULY INCORPORATED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL CORPORATE EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TRIRD DAY OF JULY, A.D. 2007.

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

070778079



Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5813440

DATE: 07-03-07