

Florida Department of State

Division of Corporations
Public Access System

Electronic Filing Cover Sheet

17070001983113

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H07000198311 3)))



H070001983113ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : CNL FINANCIAL GROUP, INC.
Account Number : 113615003626
Phone : (407) 650-1000
Fax Number : (407) 540-2699

FILED
07 AUG -7 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CNL Income SR II, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

RECEIVED

07 AUG -7 PM 12:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DB

Electronic Filing Menu

Corporate Filing Menu

Help

H07000198311 3

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

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

1. CNL Income SR II, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Delaware

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 26-0582568

(FEI number, if applicable)

4. July 18, 2007

(Date of Organization)

5. perpetual

(Duration: Year limited liability company will cease to 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)

7. 450 S. Orange Avenue, Orlando, FL 32801

(Street Address of Principal Office)

8. If limited liability company is a manager-managed company, check here ☒

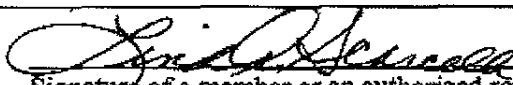
9. The name and usual business addresses of the managing members or managers are as follows:

please see attached

10. Attached is an original certificate 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 oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida:

Owner of Commercial Real Estate



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.)

Linda A. Scarcelli, Asst. Secretary

Typed or printed name of signee

FILED
 07 AUG -7 AM 10:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

H07000198311 3

H07000198311 3

**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 SR II, 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)

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

FILED
07 AUG -7 AM 10:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H07000198311 3

H07000198311 3

CNL Income SR II, LLC

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
Damian A. Perez	Independent Manager	445 Broad Hollow Road, Suite 239, Melville, NY 11747
Andrew L. Stidd	Independent Manager	445 Broad Hollow Road, Suite 239, Melville, NY 11747

Officer	Title	Address
Raymon Byron Carlock, Jr.	President	450 S. Orange Ave., Orlando, FL 32801
Robert A. Bourne	Treasurer	450 S. Orange Ave., Orlando, FL 32801
Charles A. Muller	Executive Vice President	450 S. Orange Ave., Orlando, FL 32801
Tammie A. Quinlan	Executive Vice President	450 S. Orange Ave., Orlando, FL 32801
	Secretary	450 S. Orange Ave., Orlando, FL 32801
Amy Sinelli	Senior Vice President	450 S. Orange Ave., Orlando, FL 32801
Joseph T. Johnson	Senior Vice President	450 S. Orange Ave., Orlando, FL 32801
Linda A. Scarcelli	Assistant Secretary	450 S. Orange Ave., Orlando, FL 32801

FILED
 07 AUG -7 AM 10:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

H07000198311 3

H07000198311 3

Delaware

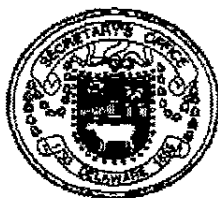
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL INCOME SR II, 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 EIGHTEENTH DAY OF JULY, A.D. 2007.

FILED

07 AUG -7 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4391068 8300

070825605

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5851519

DATE: 07-18-07

H07000198311 3