Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

mber : (850)617-6383 Fax Number

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone : (407)650-1000 Fax Number : (407)540-2699

Enter the email address for this business entity to be used for fulture annual report mailings. Enter only one email address please.

Email Address:

amy.patterson@enl.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

CNL INCOME OKEMO MOUNTAIN, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

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

SECTION I (1-3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State: CNL Income Okemo Mountain, LLC	
2. Jurisdiction of its organization: Delaware	
3. Date authorized to do business in Florida: 10/21/2008	
SECTION II (4-7 complete only the applicable changes)	
4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization? 2/1/2012	
5. New name of the limited liability company: CLP Okemo Mountain, LLC (must end with "Limited Liability Company," "LL.C.," or "LLC.)"	60,6 4
(If name unavailable, enter alternate name adopted for the purpose of transacting business Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must end with "Limited Liability Company," "L.L.	
or "LLC.") 6. If the amendment changes the period of duration, indicate new period of duration:	
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:	
8. If the amendment corrects any false statement, indicate the statement being corrected and the correction:	
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. Signature of a member or the authorized representative of a member	1
Amy J. Patterson, Authorized Representative	

Filing Fee: \$25.00

Typed or printed name of signee

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT

COPY OF THE CERTIFICATE OF AMENDMENT OF "CNL INCOME OKEMO

MOUNTAIN, LLC", CHANGING ITS NAME FROM "CNL INCOME OKEMO

MOUNTAIN, LLC" TO "CLP OKEMO MOUNTAIN, LLC", FILED IN THIS

OFFICE ON THE FIRST DAY OF FEBRUARY, A.D. 2012, AT 10:15 O'CLOCK

A.M.

4611973 8100

120109084

You may verify this certificate online at cosp. doleware. gov/authour.shtml

jeffley W. Bullock, Secretary of State

OTHENTICATION: 9338399

DATE: 02-02-12

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State of Delaware Secretary of State Division of Corporations Delivered 10:22 AM 02/01/2012 FILED 10:15 AM 02/01/2012 SRV 120109084 - 4611973 FILE

CERTIFICATE OF AMENDMENT

TO

CERTIFICATE OF FORMATION

OF

CNL INCOME OKEMO MOUNTAIN, LLC

FIRST. The name of the limited liability company is CNL INCOME OKEMO MOUNTAIN, LLC (the "Company").

SECOND. Article 1 of the Certificate of Formation of the Company, filed on 10/15/2008 in the Office of the Secretary of State of the State of Delaware, shall be amended as follows:

The name of the Company shall be CLP Okemo Mountain, LLC.

IN WITNESS WHEREOF, the undersigned Authorized Person of the Company has executed this Certificate of Amendment to Certificate of Formation this 31st day of January, 2012.

By: /S/ AMY J. PATTERSON

Name: Amy J. Patterson Title: Authorized Person