

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

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.

(((H09000014313 3)))



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

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023

Phone : (850)222-1092

Fax Number

: (850)878-5368

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CGP Weston Hills Manager, LLC

Certificate of Status	TO A. LIM
Certified Copy	JAN O
Page Count	JAN 22 2008
Estimated Charge	\$125.00 ER

Plectroffic Filing Menu

Corporate Filing Menu

Help

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

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIBITLY COMPANY TO TRANSACT BUSINESS. IN THE STATE OF PLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT B	USINESS INTHE S	TATE OF FLORIDA:			
CGP Weston Hills Manager, LLC					
(Name of Foreign Limited Liability Com	pany; must include	"Limited Linbility Con	ipany," "L.L.C.," or	"LLC."L	2
					<u> </u>
(If name unavailable, enter alternate name adopt	ed for the purpose	of unsacting business	n Florida and attach	и сору о	the writte
consent of the managers or managing members a Company," "L.L.C.," "LLC."	raobring me arrem	ale name. I de alternale i	inne musi include "		patrility ·
m	_			(C)	
[Jurisdiction under the law of which foreign I company is organized)	Imited Bability	(FEI nun	ber, if applicable)	111	至
4. 1/20/09	5.	Perpetual		52	••
(Date of Organization)		(Duration: Year limite exist or "perpetual")	d liability company	Will-cease	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
6.			•		
(Oate first transucia	d business in Flori	da, li prior to registratio determine penalty liabi	1.) lity)		Navala us.
5080 Spectrum Drive, Suite 1100 East, Addi					
					_
	(See Liberty	rational Ave.			
•	(Street Addrass of	Principal Office)	•		
 If limited liability company is a mana 	ger-managed c	ompany, check here			
9. The name and usual business address	es of the manag	ing members or mar	agers are as follo	:ewc	
CGP BevCa Holdings III, LLC, 5080 Specie	ram Drive, Suite 1	100 East, Addison, Texa	× 75001		
					~~
					—
 Attached is an original certificate of existence, rethe jurisdiction under the law of which it is organizations of the certificate under outh of the translation. 	ed. (A photocopy is	s not acceptable. If the cer			
11. Nature of business or purposes to be	conducted or p	romoted in Florida:	To manage and ope	nate golf	
course facilities and to hold liquor licenses at					
Dunda,	he				 '
(In accordance with sect	ion 608.408(3), ກີ.ຮີ	orized representative the execution of this docu- that the facts smed beloin	Tient constitutes		
		nda Gray, Vice Presiden			
Typ	ed or printed n	ame of signee			

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:	at ~ 9
CGP Weston Hills Manuger, LLC	7009 x
If name unavailable, the alternate name to be used in the state of Florida is	HASSEE A
2. The name and the Florida street address of the registered agent and offi	
C T Corporation System	
(Name)	
1200 South Pine Island Road	
Florida Street Address (P.O. Box NOT ACCEPTABLE)	
Plantation FL 3333	24
City/State/Zin	

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.

CT Corporation System

CONNECTION

By: Comparation System Connie Bryan

(Signature) Assistant Secretary

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

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

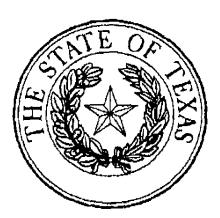
The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for CGP Weston Hills Manager, LLC (file number 801076215), a Domestic Limited Liability Company (LLC), was filed in this office on January 20, 2009.

It is further certified that the entity status in Texas is in existence.

109 JAN 21 AM II: 28 Dedre fary of strif

T

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on January 21, 2009.



Hope Andrade Secretary of State