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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

AMY J. PATTERSON

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 future annual report mailings. Enter only one email address please. **

			· U
Smail	Address:	- amy patterson@cnl.com	1

Foreign Limited Liability Company Sunrise Third (Pool I), LLC

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

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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 LIABILITY COMPANY TO TRANSACT RUSINESS IN THE STATE OF FLORIDA:

LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN	THE S	STATE OF FLORIDA:	
I. Sunrise Third (Pool I), LLC			
(Name of Foreign Limited Liability Company; must	includ	e "Limited Liability Company," "L.L.C.," or "LLC.")	
(If name unavailable, enter alternate name adopted for the personnent of the managers or managing members adopting the Company," "L.L.C," "LLC.")			
2. Delaware	3	54-2109678	
(Jurisdiction under the law of which foreign limited liable company is organized)		(FEI number, if applicable)	
4. May 5, 2003	5.	Perpetual	<u> </u>
(Date of Organization)		(Duration: Year limited liability company will cease exist or "perpetual")	
6. Upon registration			- SE
(Date first transacted business (See sections 608.501 & 608.50)	in Flor 2 F.S.	rida, if prior to registration.) to determine penalty liability)	
7. 450 S. Orange Avenue			-99 중약
Orlando, FL32801			H 8 16
	dress o	f Principal Office)	— <u>Z</u>
8. If limited liability company is a manager-mana9. The name and usual business addresses of the	•	1 7, 4000	
Please see attached		6	
- Icase see allasiica			
10. Attached is an original certificate of existence, no more that the jurisdiction under the law of which it is organized. (A photranslation of the certificate under eath of the translator must be	юсору	is not acceptable. If the certificate is in a foreign languag	
11. Nature of business or purposes to be conduct	ed or	promoted in Florida:	
owner/lessor of commercial real prop	erty		·
- Who			
. • • • •		horized representative of a member.	
penalties of perjury that the facts stated herein	are true	tion of this document constitutes an affirmation under the . I am aware that any false information submitted in a a third degree felony as provided for in s.817.155, F.S.	
Joseph T. Johnson			7
Typed or pr	inted	name of signee	

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SUNRISE THIRD (POOL I), LLC

MANAGERS

Name	<u>Address</u>
Charles A. Muller	450 S. Orange Avenue, Orlando, FL 32801
Tammie A. Quinlan	450 S. Orange Avenue, Orlando, FL 32801
Joseph T. Johnson	450 S. Orange Avenue, Orlando, FL 32801
Tony Wong	68 So. Service Road, Suite 120, Melville, NY 11747
David V. DeAngelis	68 So. Service Road, Suite 120, Melville, NY 11747

DIVISION OF CORPORATIONS
11 FEB 15 M 8: 16

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:	
Sunrise Third (Pool I), LLC	
If unavailable, the alternate to be used in the state of Florida is:	·
	o
2. The name and the Florida street address of the registered agent and office are:	SECRETAL PROPERTY OF THE PROPE
Línda A. Scarcelli	— B 15
(Name)	
450 S. Orange Avenue	3
Florida Street Address (P.O. Box NOT ACCEPTABLE)	7 7 TON
Orlando _{FL} 32801	· 7
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.

Soul Scheell (Signature)

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

Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HERBY CERTIFY "SUNRISE THIRD (POOL I), 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 SEVENTEENTH DAY OF DECEMBER, A.D.
2010.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SONRISE THIRD (POOL I), LLC" WAS FORMED ON THE FIFTH DAY OF MAY, A.D. 2003.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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You may verify this certificate online at cosp. delaware. gov/authwor.shtml

Jeffrey W. Bullock, Secretary of State
AUTHENTY CATION: 8436938

DATE: 12-17-10

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