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To:

Division of Corporations

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From:

LINDA A. SCARCELLI

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.\*\*

Email Address: linda.scarcelli@cnl.com

#### Foreign Limited Liability Company GR-105 LPHC, LLC

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EXAMINER

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

IN COMPLIANCE WITH SECTION 608.508, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED HART ITY COMPANY TO TRANSACT BUSINESS: IN THE STATE OF FLORIDA:

	GR-105 LPHC, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
CO	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the versions of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Dispany," "L.L.C," "LLC.")	writte ity
	Delaware  3. (Jurisdiction under the law of which foreign limited liability company is organized)  (FEI number, if applicable)	
4.	April 25, 2011  (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.		4 [
	Orlando, FL 32801  (Street Address of Principal Office)	1)
8.	If limited liability company is a manager-managed company, check here	J
9.	The name and usual business addresses of the managing members or managers are as follows:  Robert A. Bourne, 450 So. Orange Avenue, Orlando, FL 32801	
	Steven D. Shackelford, 450 So. Orange Avenue, Orlando, FL 32801	
	Lillian Wong, One North Wacker Drive 7th Floor Chicago IL 60606	
the	). Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of reco ejurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a restation of the certificate under oath of the translator must be submitted.)	ords i
IJ	Nature of business or purposes to be conducted or promoted in Florida:	
	Holding company  Line of State	•
	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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)  Linda A. Scarcelli	

Typed or printed name of signee

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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 Con	mpany is:	
GR-105 LPHC, LLC		
If unavailable, the alternate to be used in	the state of Florida is:	
2. The name and the Florida street addre	ss of the registered agent and office ar	e:
Linda A. Scarcelli		ALLAND TO
	(Name)	
450 So. Orange Av		SEC. 0: A≥ TT
Florida Street	Address (P.O. Box NOT ACCEPTABLE)	F.S
Orlando	FL 32801	TATE ORIDA
	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.

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)



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### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "GR-105 LPRC, 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 TWENTY-SIXTH DAY OF APRIL, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GR-105 LPHC, LLC" WAS FORMED ON THE TWENTY-FIFTH DAY OF APRIL, A.D. 2011

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

4973049 8300

110449945

You may verify this certificate culine at corp.delaware.gov/authwer.shtml

AUTHENTICATION: 8716572

DATE: 04-26-11

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