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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

CINDA 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

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SECNETARY OF STATE
ALLAHASSEE. FLORIDA

## Foreign Limited Liability Company IN-104 Austin, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

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JUN - 7 2011

**EXAMINER** 

4

#### H11000147799 3

### 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 BUSINESS IN THE STATE OF FLORIDA:

1. IN-104 Austin, 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 writte 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 forcign limited liability company is organized)  3. 45-2130127  (FEI number, if applicable)
4. May 6, 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. 450 So. 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:
Steven D. Shackelford, 450 So. Orange Avenue, Orlando, FL 32801  Robert A. Bourne, 450 So. Orange Avenue, Orlando, FL 32801  Rosemary Mills, 450 So. Orange Avenue, Orlando, FL 32801
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/lessor 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 negative of periors that the facts stated begin are true. I am appear that any falce information guberityed in a

Typed or printed name of signee

Linda A. Scarcelli

document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

## H1 1000147799 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.

IN-104 Austin, LLC	Joinpany is.	
If unavailable, the alternate to be used	in the state of Florida is:	
2. The name and the Florida street add	dress of the registered agent and office are:	
Linda A. Scarcelli		_
	(Name)	
450 So. Orange A		_
Florida Stre	et Address (P.O. Box NOT ACCEPTABLE)	•
Orlando	<sub>FL</sub> 32801	_
	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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# Delaware

PAGE :

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IN-104 AUSTIN, 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 SIXTH DAY OF MAY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IN-104 AUSTIN, LLC" WAS FORMED ON THE SIXTH DAY OF MAY, A.D. 2011.

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

4979347 8300

110505563

You may verify this certificate online

AUTHENTY CATION: 8745732

DATE: 05-06-11