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:oT

Division of Corporations

Fax Number : (850) 61.7-6383

From:

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 : (407)650-1000 Phone

Fax Number : (407)540-2699

Co*Enter the email address for this business entity to be used for future Staffinual report mailings. Enter only one email address please.** Kmail Address:

(0M)

Foreign Limited Liability Company CHP Cypress Partners I, LLC

Certificate of Status	0
Certified Copy	0
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Electronic Filing Menu Corporate Filing Menu

J. HARRIS Help

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIC	VA:	
1. CHP Cypress Partners I, 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. The alternate na- Liability Company," "L.L.C," or "LLC.")	ne must include "Limited	
_{2.} Delaware _{3.} pending		
	(PEI number. if applicable)	
_{4.} upon qualification		
(Date first transacted business in Florida, if order to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)	SS SS	
5. 450 S. Orange Avenue	NON SECTION OF SECTION	
Orlando, FL 32801	955	
(Street Address of Principal Office)	2 10	
6. PO Box 4920	<u> </u>	
Orlando, FL 32802-4920	6 <u>32</u>	
(Mailing Address)		
7. The name, title or capacity and address of the person(s) who has/have authority to ma	nage is/are;	
Stephen H. Mauldin, Manager, 450 S. Orange Avenue, Orlando	, FL 32801	
Holly J. Greer, Manager, 450 S. Orange Avenue, Orlando,	FL 32801	
Joseph T. Johnson, Manager, 450 S. Orange Avenue, Orlando	, FL 32801	
8. Attached is an original certificate of existence, no more than 90 days old, duly authent having custody of records in the jurisdiction under the law of which it is organized. (A phacceptable. If the certificate is in a foreign language, a translation of the certificate under must be submitted)	notocopy is not	
Signature of an authorized person (In accordance with section 605.0203, F.S., the execution of this document constitutes an affirmation under the penalties of perjury taken aware that any false information submitted in a document to the Department of State constitutes a third degree follony as provided		

Amy J. Patterson

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

CHP Cypress Partne		
If unavailable, the alternate to be use	ed in the state of Florida is:	
2. The name and the Florida street a	ddress of the registered agent and office are	*
Amy J. Pati		AON 374
	(Name)	AON MAN
450 S. Orai	nge Avenue	5
Florida S	treet Address (P.O. Box NOT ACCEPTABLE)	
Orlando	FL 32801	9: 45
	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 605, Florida Statutes.

(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

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "CHP CYPRESS PARTNERS 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 TWELFTH DAY OF NOVEMBER, A.D. 2014.

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

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "CHP CYPRESS
PARTNERS I, LLC" WAS FORMED ON THE TWELFTH DAY OF NOVEMBER, A.D.
2014.

5637509 8300

141397650

DATE: 11-12-14

may verify this certificate onlin