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To:		<i>i</i> :			
70.	Division of Corporations				
	Fax Number : (850)617-6383				
From:					
	Account Name : CNL FINANCIAL GROUP, INC.	ý.			
	Account Number : 113615003626	<u>~.</u> ′			
	Phone • (497)659-1552	. •			

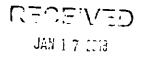
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Fax Number : (407)540-2699

Email Address: AMY PATTERSON & CAL. COM

Foreign Limited Liability Company CLP Retail Manager, LLC

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Help

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

IN COMPLIANCE WITH SEC COMPANY TO TRANSACT BE	THON 605.0902, FLORIDA STATUTES, THE I USINESS INTHE STATE OF FLORIDA:	FOLLOWING IS	SUBMITTED TO REGISTE	R A FOREIGN	LIMITED LIABILIT
1 CLP Retail Manager, I	LLC		* *.		
	Limited Liability Company; must include *Limi	ited Liability Comp	pany," "L.L.C.," or "LLC.")		
(If name you will take out a large to	came adopted for the purpose of transacting business at F	The shares	7		
	the sappear to the harbott of nautacons onthics at t		tertine commerciation of managed prespe	ary Company," "L	LC," or "CEC.")
2. Delaware (forsidiction under the law of which foreign limited liability company is organized) (FEI number, i					
			,,		
4 Upon qualification	(Date And Invested Series). Head is in	an madeline i			
	(Date first transacted basiness in Florida, if prior to (See sections 605,0904 & 605,0905, F.S. to deter-	mine penalty lubility)		15.5
5. 450 S. Orange Avenue		6			<u> </u>
(Street Address of) Orlando, Florida 3280			(Mailing Addre	\$\$)	- · · ·
		-			•
					
7. Name and street addres	ss of Florida registered agent: (P.O. Bo	ox <u>NOT</u> accept	lable)		•
Name:	Amy J. Patterson		_		ign (
ο σ.	450 S. Orange Avenue				, . 26
Office Address:			_		
	Orlando		_ , Florida <u>32801</u>	<u>_</u>	
Registered agent's accep	(City)		(Zip code)	ı	
and accept the obligation	s of my position as registered agent. (Registered agent				
8. The name, title or cap. <u>Title or Capacity:</u>	acity and address of the person(s) who have and Address:	has/have author	rity to manage is/are: - Capacity:	Name and	Address:
Member	CNL Lifestyle Advisor Corp	oration in	<u> </u>		
	450 S. Orange Avenue Orlando, Fiorida 32801	_			
			<u></u>		
(Use attachments if neces	sary)				
	of existence, no more than 90 days old of which it is organized. (If the certifical ubmitted)				
	cuted in accordance with section 605.02 to the Department of State constitutes at				
	Signatur	cre of an authorized p	2308		
	\mathcal{O}				
	Amy J. Patterson	ar primed name of si	****		
	1 3000	pause o (3-445 (7) \$1,			

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Delaware The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "CLP RETAIL MANAGER, 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 JANUARY, A.D. 2018.

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

 \mathbf{r}'

3882849 8300 SR# 20180218207

You may verify this certificate online at corp.delaware.gov/authver.shtml

Jattrey W. Balloct, Secretary of State

Authentication: 201962237

Date: 01-12-18