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. CORPORATION NAME	(S) AND DOCUMENT NUMBER(,
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Walk In Mail Out Will Wait Photocopy	Pick Up Time RUSH RUG	Certificate of Status Certificate of Good Standing ARTICLES ONLY Certificate DOCS
Profit NonProfit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
OTHER FILINGS Annual Report Fictitious Name Name Reservation	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	CORP SEARCH 11: H W 41 1 LA 11 LA ME 1
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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 BUSINESS IN THE STATE OF FLORIDA:

1CYPR	ESS/ORLANDO, L.L.C.	- 			
(Name of for	eign limited liability company mus I in the name at present.)	st end with the wo	rds "limited company" or their abbrev	riation "L.C." if n	<u>~</u>
30 Contained	in the name at present.)			۰.0	
2. Delawa:	re	3.		96	93
(Jurisdiction	under the law of which foreign lim	ited liability	(FEI number, if applic	able) 🧲	2077
company is c	organized)			τ,	- 732
A 7,,1,,	6, 1999	5.	December 31, 2050		900
	(Date of Organization)		(Duration: Year limited liability con	npany will cease	to Son
			exist or "perpetual")	-Fi2	F. 20
- 	77.67.6				υ <u>Θ</u>
6. Upon c	qualification (Date first transacted business in	n Florida (See se	ctions 608.501, 608.502, and 817.155		. w #
	(Date 111st transacted business 1	ii i Torida. (Dec se	cuous 006.501, 006.502, and 617.155	, 1	-
7. 3301	West End Avenue, Suite	200			s
Nash	ville, Tennessee 37203				
	(Street address of	principal office)		-
	title, and business address of				-
			g member[MGRM] or manager orida: (attach additional page if		-
					-
will manage					-
will manage	e the foreign limited liability NAME & ADDRESS:	company in Fl	orida: (attach additional page if	necessary)	·
will manage	e the foreign limited liability	company in Fl	orida: (attach additional page if	necessary)	
will manage	NAME & ADDRESS: C. Harris Haston	company in Fl	orida: (attach additional page if NAME & ADDRESS: L. Marc Carter	necessary)	- • •
will manage	e the foreign limited liability NAME & ADDRESS:	company in Fl	orida: (attach additional page if	necessary)	
will manage	NAME & ADDRESS: C. Harris Haston	company in Fl	orida: (attach additional page if NAME & ADDRESS: L. Marc Carter 3301 West End Avenue	necessary)	-
will manage	NAME & ADDRESS: C. Harris Haston 3301 West End Avenue Suite 400	company in Fl	orida: (attach additional page if NAME & ADDRESS: L. Marc Carter	necessary)	
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will manage	NAME & ADDRESS: C. Harris Haston 3301 West End Avenue Suite 400	company in Fl	orida: (attach additional page if NAME & ADDRESS: L. Marc Carter 3301 West End Avenue Suite 400	necessary)	

9. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

	is a second
The undersigned member or authorized representative of a member of	
CYPRESS/ORLANDO, L.L.C. certifies:	JUL 1
1) the above named limited liability company has at least one member;	PH 4: 33
2) the total amount of cash contributed by the member(s) is	\$ <u>336,000</u> ;
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.) and	\$ <u> </u>
4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	\$_336,000
Signature of a member or an authorized representative of a mem	ber.
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	
CAULEY HARRIS HASTON	
Typed or printed name of signee	

Filing Fee: \$250.00 for Application and Affidavit

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.

STATE OF FLORIDA.	Źĸ,
1. The name of the Limited Liability Company is:	3000
CYPRESS/ORLANDO, L.L.C.	(
2. The name and the Florida street address of the registered agent and office are:	PM 4: 33
NRAI Services, Inc.	
(Name)	
526 E. Park Avenue Florida street address (P.O. Box NOT ACCEPTABLE)	
Tallahassee FL 32301 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.

Signature) Assistant Secretary

Filing Fee: \$ 35 for Designation of Registered Agent

State of Delaware Office of the Secretary of State

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I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CYPRESS/ORLANDO, L.L.C." 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 POSSIBLE SHOW, AS OF THE EIGHTH DAY OF JULY, A.D. 1999.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID TO STATE OF JULY,

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

Edward I. Freel, Secretary of State

3066002 8300

AUTHENTICATION:

9853135

991278597

DATE:

07-08-99