# .072100000032 ACCOUNT NO.

REFERENCE

126600

4372680

AUTHORIZATION

COST LIMIT

ORDER DATE: February 8, 1999

ORDER TIME :

2:44 PM

ORDER NO. : 126600-015

CUSTOMER NO: 4372680

CUSTOMER:

Colleen A. Johnson, Legal Asst

Drinker Biddle & Reath

Philadelphia Nat'l Bank Bldg

1345 Chestnut Street

Philadelphia, PA 19107-3496

#### FOREIGN FILINGS

NAME: PR BERFLA LLC

100002773411

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Robert Maxwell

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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:

(	Name of foreign lin	mited liabili	ity company)	<del></del>	
Delaware	-	3.	• •	= <u>=</u>	
furisdiction under the law of which foreign limited liability ompany is organized)					
December 15, 1998	<u>-</u>	5. Perpe	tual -	· · · ·	
(Date of Organization)	-	(Durat exist o	ion: Year lim r "perpetual")	ited liability co	ompany will cease
Upon filing		. •		<del></del> :	
(Date first transacted busine	ss in Florida. (See	sections 60	8.501, 608.502	2, and 817.155,	F.S.)
The Bellevue, 200 South Broad Str					
see Bellevae, 200 Botten Broad Str	reet, Philadell	onia, PA	19102	-	
	(Street address o	f principal	office)		
			•		
st name, title, and business address					
	of each managi	no memh	er[MCRM]	Or mañagar	MCDlmbo
Il manage the foreign limited liability	of each managi	ng memb	er[MGRM]	or manager	[MGR]who
Il manage the foreign limited liabilit	of each managi ty company in I	ng memb Florida: (a	er[MGRM] attach additi	or ma <u>n</u> ager ional page if	[MGR]who necessary)
Il manage the foreign limited liabilit  NAME & ADDRESS:	of each managity company in I	Florida: (a	er[MGRM] attach additi ME & ADD	ional page if	[MGR]who necessary)
II manage the foreign limited liabilit	ty company in I	Florida: (a	attach additi	ional page if	necessary)
NAME & ADDRESS:  PREIT Associates, L.P.	ty company in I	Florida: (a	attach additi	ional page if	necessary)
Il manage the foreign limited liabilit  NAME & ADDRESS:	ty company in I	Florida: (a	attach additi	ional page if	TITLE:
NAME & ADDRESS:  PREIT Associates, L.P.	ty company in I	Florida: (a	attach additi	ional page if	TITLE:
NAME & ADDRESS:  PREIT Associates, L.P.  The Bellevue  200 South Broad Street	ty company in I	Florida: (a	attach additi	ional page if	TITLE:
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NAME & ADDRESS:  PREIT Associates, L.P.  The Bellevue  200 South Broad Street	ty company in I	Florida: (a	attach additi	ional page if	TITLE:  SECRETARY  OIVISION OF FO

# AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or au	thorized represe	entative of a member of PR	Berfla LLC	
		certifies:	 	
1) the above named limited liab	ility company h	as at least one member;	-	
2) the total amount of cash contr	ributed by the m	ember(s) is		\$_100.00;
3) if any, the agreed value of pro (A description of the property and	-		ber(s) is	\$ 0.00
4) the total amount of cash and p by member(s) is (This total includes amounts			contributed -	\$_100.00
	O Luin		<u>.</u>	·
(În accordațice affidavit consti stated herein are	with section 608.4 tutes an affirmation true.)	authorized representative (08(3), Florida Statutes, the exemple of the penalties of perjury	cution of this	ber.
PR Berfl			= =	
By: PREI	r Associates,	L.P., its sole member	r <u>-</u>	8 <u>-</u>
By: Penn ———————————————————————————————————	rrav a linn	Estate Investment Tr Vice President — Acq or printed name of signee	ust, its g uisi <u>tions</u>	PASION OF CORPORATION OF LED IN 1914

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, FLÖRIDA 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 Company is:	<del></del>	
PR Berfla LLC	<u></u>	<u> </u>
2. The name and the Florida street address of the registered agent and office	ce are:_	
Corporation Service Company (Name)	<u> </u>	SECRET DIVISION O
1201 Hays Street  Florida street address (P.O. Box NOT ACCEPTABLE)		FILED ARY OF STATE F CORPORATI
Tallahassee, FL 32301  City/State/Zip	<u> </u>	SHO 14

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.

By: Tabatha 7. 7i ocelli - ASS+ VP (Signature)

Filing Fee: \$ 35 for Designation of Registered Agent

#### $State\ of\ Delaware$

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### Office of the Secretary of State

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PR BERFLA 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 NINTH DAY OF FEBRUARY, A.D. 1999.

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

2979162 8300 991049944



9565021 \$2-09-99

Edward J. Freel, Secretary of State

**AUTHENTICATION:** 

DATE: