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ON SERVICE COMPANY	24
ACCOUNT NO.	= 072100000032
REFERENCE	289788 4306525
AUTHORIZATION	Patricia Pyjut
COST LIMIT	The state of the s
ORDER DATE: October 22, 2003	₹
ORDER TIME : 10:31 AM	- !
ORDER NO. : 289788-010	
CUSTOMER NO: 4306525	viga."
CUSTOMER: Seth Bloom, Esq Sills Cummis Radin T One Riverfront Plaza	
Newark, NJ 07102-54	00
FOREIGN FI	<u>LTNGS</u>
NAME: MELROSE HÓUSIN LP	G OF GAINESVILLE
XXXX QUALIFICATION (TYPE: LP) =
PLEASE RETURN THE FOLLOWING AS	PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STA	NDING
CONTACT PERSON: Amanda Haddan	=EXT# 1155

EXAMINER:

APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

				1		
1 Melrose Housing of Gainesville	e LP	=-	ي. - سب	. 13	 51.	6
		ership as it is i	in the home st	tate)		
^		<u></u>			# .	ŕ
Cf name is unavailable name and a subject	. 41 11				<u> </u>	
(If name is unavailable, name under which must co	ontain the wo	parinership pro ord "LIMITED	oposes to regi or "LTD.")	ister or tran	sact busi	ness in Florida
		<u></u>		, i.		
3 Delaware		0ctob	er 17, 200		<u> </u>	
(State of Formation)			(Da	te of Forma	ition)	
5 Corporation Service Company				- 1	· F A	
	Registered A	gent for Servi	ice of Process	s)	<u> </u>	
_		· -				
6,1201 Hays Street			<u> </u>	:-	जे न ः	
(S	treet Address	s of Registered	i Office)		,	
Tallahassee			Florida 3230	O.T.	1	
(City)			Fiorida 333	(Zip C	ode)	
				` -		
7 Assessment built Bestered Assess Co	. m t em	2 - 				
7. Acceptance by the Registered Agent for		*****			}	
Corporation Se	9	pany _	<i>/</i> /	L11 P) '	
By: deren	TA gant mus	t sign on this l	ina	- V Y	<u>1 =</u>	•
	(Agent mus	t sign on uns i	me		;	
7077 Bonneval Road, Suite 600			·	·		
Yankannilla Manida 20026	4	***			; 1	
Jacksonville, Florida 32216 (Address of registered office require	d in state of	formation or i	f not required	address o	f princin	al office)
(x and the dr regions and office	4 111 01410 01 1	_	. not required	i, www.coo	printoip	ui (iiico.)
D. NAMES OF GENERAL PARTNERS			STRI	EET ADDF	uėss –	
UCH Gainesville_LLC7077	Bonneval	Road, <u>S</u> uite	e 600, Jac	ksonvill	e, FL	32216
					į.	
MUZICIONIZE	7,	* 4			*	
11010000057	/ L /					
					100	
	7 (7)		 ·	<u> </u>		
		<u>-</u>				
0.7077 Bonneval Road, Suite 600					1	
(Office where Names, Ac	igresses and	Contributions	or Limited Pa	armers are l	cent.)	

11. The limited partnership will undertake to keep the records listing the addresses and capital contributions of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

12.7077 Bonneval Road, Suite 600	, Jacksonville, FL 32	216	 -
a - - 1		· .	
(Ma	iling Address of Limited Par	tnership)	
Under penalties of perjury I, being duly sw and that the facts stated herein are true and		the foregoing and kn	ow the contents thereof
Signed this 21st day of	October	, 2003	
Slother	HCleary General Partners	AUTHORIZED PER	SON FOR
STATE OF New Jersey	0	UCH GAINE	FE LLC
COUNTY OF Essex			Les .
On this 211 day of	October . 💆 200	3	! •
Siobhan McCleary		, personally ap	peared before me,
who is personally known to me	-		\$
whose identity I proved on the basis of		·	17
		* /2	74
Darhay	Notary Public Signature)	werton	: !
Barbara L	Notary's Printed Name)	erton	•
Seal My Commission Ex	pires: 12/3/06	2	F

BARBARA LOUISE OVERTON NOTARY PUBLIC OF NEW JERSEY Commission Expires 12/3/06

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared SIOBHAN MG	CLEARY, AUTHORIZED	PERSON FOR UC
a general partner of Melrose Housing of Gainesville LP	, a (an) Delaware	GAINESULI
limited partnership, hereinafter referred to as the "Partnership", who certi	fies as follows:	
1. The amount of capital contributions of the limited partners is \$ 20.	00	
2. The anticipated amount of the capital contributions of the limited partr		oses of
transacting business in Florida is \$ 20.00	· · · · · · · · · · · · · · · · · · ·	
	<u> </u>	•
Under the penalties of perjury I, being duly sworn, declare that I have re	ad the foregoing and know the co	ntents thereof and
that the facts stated herein are true and correct.	•	
2154	į.	
Signed this 215t day of October , 2003	; •	
	* !	
0.17	1	
Sodiau McClary General Partner	X AUTHORIZED PERSON FO	e uch
General Partner	J' GAINESVILLE	ul
STATE OF New Jersey	_ t-ui.	
COUNTY OF Essex	1	
2154	· • • • • • • • • • • • • • • • • • • •	
On this day of Octobe	er 2003	-)
-11-4	; ;	
Siobhan McCleary ,	personally appeared before me,	
ma	<u> </u>	
who is personally known to me	•	
whose identity I proved on the basis of		H-18-811
	i	
	ļ	····
	·	
Jarbara Carriel Inglor		
(Notary Fubic Signature)	ļ	
	•	
(Notary's Printed Name)	• •	
/ /	1	
Seal My Commission Expires: $\frac{12/3}{6}$		

BARBARA LOUISE OVERTON NOTARY PUBLIC OF NEW JERSEY Commission Expires 12/3/06