B04000000321

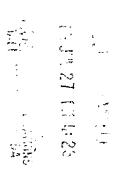
(Reque	estor's Name)	
(Addre	ss)	÷3,,
(Address)		
(City/State/Zip/Phone #)		
PICK-UP] WAIT	MAIL
	_	
(Busine	ess Entity Name)
•		
(Docum	nent Number)	
Certified Copies	Certificates of	f Status
Special Instructions to Filin	g Officer:	
		J

Office Use Only



000037359580







ACCOUNT NO. : 072100000032

REFERENCE : 797676

AUTHORIZATION : Stand

COST LIMIT : \$ 1846.25 1 (48,75

ORDER DATE : July 9, 2004

ORDER TIME : 2:19 PM

ORDER NO. : 797676-015

CUSTOMER NO: 4804484

CUSTOMER: Ms. Rosalie Harrison

Wolf Block Schorr And

22nd Floor

1650 Arch Street

Philadelphia, PA 19103-2097

FOREIGN FILINGS

NAME: JEFFERSON VALUE ASSOCIATES LP

XXXX QUALIFICATION (TYPE: <u>LP</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY

PLAIN STAMPED COPY

XX CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

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

Jefferson Value Associates LP	partnership as it is in the home state) nited partnership proposes to register or transact business in florida; he word "LIMITED" or "LTD.") 4.12/18/2003 (Date of Formation)
(Name of limited)	partnership as it is in the home state)
	Property of the second
2. Jefferson Value Associates LP LTD	
If name is unavailable, name under which the lim	nited partnership proposes to register or transact business in Florida; he word "LIMITED" or "LTD.")
must contain ii	ne word "LIMITED" or "LID,")
g Delaware	4 12/18/2003
(State of Formation)	4.12/18/2003 (Date of Formation)
	77
William A. Shewalter	
(Name of Registe	ered Agent for Service of Process)
5 c/o The Goodman Company, 777 S. Flag	gler Drive, Suite 1101
(Street Ac	ddress of Registered Office)
West Palm Beach	Florida 33401
(City)	, Florida 33401 (Zip Code)
William . Sheyallo	evall
(Agen	t must sign on this line)
c/o Corporation Service Company, 271	11 Centerville Road, Suite 400
Vilmington, Delaware 19908	
	te of formation or, if not required, address of principal office.)
. NAMES OF GENERAL PARTNERS	STREET ADDRESS
#M0400003000	
Second Jeff GP LLC	c/o The Goodman Company
	777 S. Flagler Drive, Suite 1101
	West Palm Beach, FL 33401
0. 777 S. Flagler Drive, Suite 1101,	West Palm Reach W. 33401
(Office where Names Addresses	s and Contributions of Limited Partners are kept.)

CONTINUED

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 c/o Goodman Company, Inc. 777 S. Flagler Drive, Suite 1101,
West Palm Beach, FL 33401 (Mailing Address of Limited Partnership)
Under penalties of perjury I, being duly sworn, declare that I have read the foregoing and know the contents thereof and that the facts stated herein are true and correct.
Signed this / 5 day of
By: William A. Shewalter, Vice President STATE OF + COC. A
COUNTY OF DALM BEACH
On thisday of,,
William A. Shewalter, personally appeared before me,
Twho is personally known to me
whose identity I proved on the basis of
(Notary Public Signature)
COMMISSION NUMBER CCOMMISSION NUMBER CCOMMISSION NUMBER CCOMMISSION EXPIRES MY CCMMISSION EXPIRES (Notary's Printed Name)

My Commission Expires:____

Seal

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

Will BEFORE ME the undersigned personally appeared Man	liam A. Shewalter, VP of Goodman Properties, Inc. nager of Second Jeff GP LLC
a general partner of Jefferson Value Associat	
limited partnership, hereinafter referred to as the "Partnersh	
1. The amount of capital contributions of the limited partne	ers is \$
2. The anticipated amount of the capital contributions of the	e limited partners that are allocated for the purposes of
transacting business in Florida is \$	
Under the penalties of perjury I, being duly sworn, declare	that I have read the foregoing and know the contents thereof and
that the facts stated herein are true and correct.	
Will Co	
STATE OF TLOVIDA	E S
COUNTY OF	
On thisday of	uly, 2004,
William A. Shewalter	, personally appeared before me,
who is personally known to me whose identity I proved on the basis of	
(Notary Public Signature)	
Docarre M. Garrin (Notary's Printed Name)	COMMISSION NUMBER CCG67909 MY COMMISSION EXPIRES OF FLOR JAN. 1,2005

My Commission Expires: 1-1-05

Seal