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FOREIGN LIMITED PARTNERSHIP

PHF Oceanfront LP

Certificate of Status	0
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APPLICATION BY FOREIGN LIMITED PARTNERSHIP FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. PHF Oceanfront LP
(Name of limited partnership as it is in the home state)

2. _____
(If name is unavailable, name under which the limited partnership proposes to register or transact business in Florida; must contain the word "LIMITED" or "LTD.")

3. Delaware (State of Formation) 4. June 2, 2005 (Date of Formation)

5. C T Corporation System
(Name of Registered Agent for Service of Process)

6. c/o C T Corporation System, 1200 South Pine Island Road
(Street Address of Registered Office)

Plantation (City), Florida 33324 (Zip Code)

7. Acceptance by the Registered Agent for Service of Process:
C T Corporation System
By: Connie Bryan Special Asst. Secretary
(Agent must sign on this line)

8. c/o The Corporation Trust Company, Corporation Trust Center, 1209 Orange Street,
Wilmington, New Castle County, Delaware 19801
(Address of registered office required in state of formation or, if not required, address of principal office.)

05 JUN 10 AM 10:36
TALLAHASSEE, FLORIDA

9. NAMES OF GENERAL PARTNERS — STREET ADDRESS

PHF Florida GP LLC — c/o Pyramid Advisors LLC

M05-3158 — One Post Office Square

Boston, MA 02109

10. c/o Pyramid Advisors LLC, One Post Office Square, Boston, MA 02109
(Office where Names, Addresses and Contributions of Limited Partners are kept.)

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of the limited partner or limited partners until the limited partnership's registration in Florida is canceled or withdrawn.

CONTINUED

12. c/o Pyramid Advisors LLC, One Post Office Square, Boston, MA 02109

(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 9th day of June, 2005

General Partner Vice President of PHF Florida GP LLC

STATE OF MA

COUNTY OF Suffolk

On this 9th day of June 2005

Warren Fields, personally appeared before me,

☒ who is personally known to me

☐ whose identity I proved on the basis of

Maureen F. Kiley
(Notary Public's Signature)

Maureen F. Kiley
(Notary's Printed Name)

Seal

My Commission Expires

MAUREEN F. KILEY
Notary Public
Commonwealth of Massachusetts
My Commission Expires
March 12, 2010

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF CAPITAL CONTRIBUTIONS FOR A FOREIGN LIMITED PARTNERSHIP

BEFORE ME the undersigned personally appeared Warren Q. Fields, Authorized Representative of PHF Florida GP, LLC a general partner of PHF Oceanfront LP, a (an) Delaware limited partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is $ 1,725,888.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purpose of transacting business in Florida is $1,725,888.

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.

Signed this 9th day of June, 2005

General Partner
Vice President of PHF Florida GP LLC, its General Partner

STATE OF MA

COUNTY OF Suffolk

On this 9th day of June, 2005,

Warren Fields, personally appeared before me,

☒ who is personally known to me
☐ whose identity I proved on the basis of _____

05 JUN 10 AM 10:25
SEC. OF STATE
TALLAHASSEE, FLORIDA

Maureen F. Riley
(Notary Public Signature)

Maureen F. Riley
(Notary's Printed Name)

My Commission Expires:

MAUREEN F. RILEY
Notary Public
Commonwealth of Massachusetts
My Commission Expires
March 12, 2010