B13000000147

(Re	equestor's Name)			
(Ad	ldress)			
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(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Do	ocument Number)			
Certified Copies				
Special Instructions to Filing Officer:				

Office Use Only



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TO ASSAURCE VALUE OF FILLING

2018 HAY 13 PK 1: 53.

SECRETARY OF STATE



ACCOUNT NO. : I2000000195 REFERENCE : 647482 7736905 AUTHORIZATION : COST LIMIT : \$ 1000 ORDER DATE: May 13, 2013 ORDER TIME : 1:09 PM ORDER NO. : 647482-010 CUSTOMER NO: 7736905 FOREIGN FILINGS NAME: MERION CHASE OAKS GP, L.P. XXXX QUALIFICATION (TYPE: LP) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ____ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Harry B. Davis -- EXT# 2926

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Merion Chase Oaks GP, L.P.	
Name of Foreign Limited Partnership or Limited L	iability Limited Partnership
The enclosed application, certificate of status and fees are submitted to partnership to transact business in Florida. Please return all correspondence concerning this matter to:	register a foreign limited partnership or limited liability limited
Richard Kwait	
Contact Person	
Merion Realty Partners	
Firm/Company	
308 E. Lancaster Ave., Suite 300	
Address	
Wynnewood, PA 19096	
City, State and Zip Code	
rkwait@merionrealtypartners.com	

For further information concerning this matter, please call:

E-mail address: (to be used for future annual report notification)

Richard Kwait

896-3000

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$1,000.00 Filing Fees (\$965 Filing Fee and

and Certificate of

☐ \$1,008.75 Filing Fees

⊕ \$1,052.50 Filing Fees and Certified Copy

□\$1,061.25 Filing Fee, Certified Copy, and

Certificate of Status

\$35 Registered Agent

Status

Fee)

STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section Division of Corporations P. O. Box 6327

Tallahassee, FL 32314

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

, Merion Chase Oaks GP, L.P.	
Acceptable Limited Partnership suffixes: Limited Po	d Liability Limited Partnership, which must include suffix) artnership, Limited, L.P., LP, or Ltd. affixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP.
	I partnership or limited liability limited partnership proposes to register to transact n Florida; must contain acceptable suffix.
₂ Delaware	_{3.} 5/6/13
State or Country of Formation	Date of Formation
4. Federal Employer Identification Number: 90-0	0977052
5. Name of Registered Agent for Service of Proces	
Corporation Service Company	
1201 Hays Street	
Tallahassee, FL 32301	_
of all statutes relative to the proper and complete my position as registered agent. Corporation By:	sent and agree to act in this capacity. I further agree to comply with the provision. I performance of my duties, and I am familiar with and accept the obligations of Service Company Signature of Registered Agent
7. Principal Office:	8. Mailing Address:
308 E. Lancaster Ave., Suite 300	(same)
Wynnewood, PA 19096	— Coamer Por St.
	STATE SHATION 9: 50
9. If limited partnership is a limited liability limit	ited partnership, check box
10. Name, principal office address, and mailing a	address of each general partner:
Name of General Partners CMS VRE Assoc	ciates II, L.P. Name of General Partner: Merion GP, LLC
Street Address: 308 E. Lancaster Ave.,	Suite 300 Street Address: 308 E. Lancaster Ave., Suite 300
	Sittet Address.
Wynnewood, PA 1909	6 Wynnewood, PA 19096
Wynnewood, PA 19096 გეებიიი	926 m 13 0000 0 2534
Wynnewood, PA 19096 გეებიიი	
Wynnewood, PA 19096 B12000006 Mailing Address:	Mailing Address:
Wynnewood, PA 19096 B12 000006 Mailing Address: Name of General Partner:	Mailing Address: Name of General Partner:
Wynnewood, PA 19096 B12 000006 Mailing Address: Name of General Partner:	Mailing Address:
Wynnewood, PA 19096 B12000006 Mailing Address: Name of General Partner: Street Address:	Mailing Address: Name of General Partner: Street Address:

Name of General	Partner:	e 1 of 2 Name of General Partner:	
Street Address:		_ Street Address:	
Mailing Address:		Mailing Address:	
<i>Effective date cannot</i> 12. Attached is a certi	other than the date of filing: be prior to nor more than 90 days after the a ficate of existence duly authenticated, not mo f State, by the Secretary of State or other office	ate this document is filed by the Florida De re than 90 days prior to the delivery of this :	application to the
•	day of May		
	Signature of	a general partner	

The individual signing this document affirm that the facts stated herein are true and the individual is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Filing Fees:

\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75

Page 2 of 2

SECRETARY OF STATION DIVISION OF CORPORATION

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "MERION CHASE OAKS GP, L.P." 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 THIRTEENTH DAY OF MAY, A.D. 2013.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "MERION CHASE OAKS GP, L.P." WAS FORMED ON THE SIXTH DAY OF MAY, A.D. 2013.

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

5329909 8300

130568221

AUTHENTY CATION: 0426451

DATE: 05-13-13

You may verify this certificate online at corp.delaware.gov/authver.shtml