

1204 HAYS STREET
TALLAHASSEE, FL 32304

800-342-8086

904-222-4971

904-222-1911

B95000000146



95 APR 25 AM 11:15
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 21 AM 11:36

ACCOUNT NO. : 072100000032

REFERENCE : 584753 4656A

AUTHORIZATION :

Patricia Pizito

COST LIMIT : \$ ~~50.00~~

ORDER DATE : April 25, 1995 *140.00*

ORDER TIME : 10:50 AM

ORDER NO. : 584753

121111

500001463835

CUSTOMER NO: 4656A

CUSTOMER: Elizabeth Galvin, Legal Asst
GREENBERG TRAURIG HOFFMAN
LIPOFF ROSEN & QUENTEL, P. A.
22nd Floor
1221 Brickell Avenue
Miami, FL 33131-3238

DOMESTIC FILING

RUSH WILL WAIT

RUSH WILL WAIT

NAME: SHERWOOD GLEN AND WILLOWS
APARTMENTS REAL ESTATE LIMITED
PARTNERSHIP

ARTICLES OF INCORPORATION
XX CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lynne Roberts

EXAMINER'S INITIALS:

BK

4/25/95

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 25 AM 11:37

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

1. SHERWOOD GLEN AND WILLOWS APARTMENTS REAL ESTATE LIMITED PARTNERSHIP
(Name of Limited Partnership as it is in the State of Filing.)

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. April 19, 1995
(Date of Formation)

5. CORPORATION INFORMATION SERVICES, INC.
(Name of Registered Agent for Service of Process)

6. 1201 Hays Street
(Street Address or Registered Office)

Tallahassee, Florida 32301
(City) (Zip Code)

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95 APR 25 AM 11:37

7. **Acceptance by the Registered Agent for Service of Process:**

Having been named to accept service of process for the foreign limited partnership named in this "Application by Foreign Limited Partnership for Authorization to Transact Business in Florida" at the place designated therein, I hereby agree to act in this capacity and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I accept the duties and obligations of §620.192 of the Florida Statutes.

BY: Karen B. Berger
as Agent for the Registered Agent

Dated: April __, 1995.

The Secretary of State of the State of Florida has appointed the Agent of the Limited Partnership for service of process if the authority of the registered agent named above is revoked or the Agent cannot be found or served with the exercise of reasonable diligence.

8. 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.)

9. NAME OF GENERAL PARTNERS:

SPECIFIC ADDRESSES:

MFH REALTY LIMITED PARTNERSHIP,
a Delaware limited partnership

c/o JER TE-TWO SERVICES, INC.
11 Canal Center Plaza, Suite 200
Alexandria, Virginia 22314

0394000000118

10. 600 Las Colinas Boulevard, Suite 1900, Irving, Texas 75039
(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 cancelled or withdrawn.

12. 600 Las Colinas Boulevard, Suite 1900, Irving, Texas 75039
Mailing Address of the Limited Partnership

This 18 day of April, 1995.

GENERAL PARTNER:

MFH REALTY LIMITED PARTNERSHIP,
Delaware limited partnership

BY: JER TE-TWO SERVICES, INC., a Virginia
corporation, its general partner

By: [Signature]
James W. Moffett, Vice President

AFFIDAVIT OF CAPITAL CONTRIBUTIONS

BEFORE ME, the undersigned authority, personally appeared James W. Moffett, Vice President of the General Partner of MFH REALTY LIMITED PARTNERSHIP, a Delaware Limited Partnership, the General Partner of SHERWOOD GLEN and WILLOWS APARTMENT REAL ESTATE LIMITED PARTNERSHIP, a Delaware Limited Partnership, hereinafter referred to as the "Partnership", who certifies as follows:

1. The amount of capital contributions of the limited partners is \$ 5,100.00.
2. The anticipated amount of the capital contributions of the limited partners that are allocated for the purpose of transacting business in Florida is \$ 5,100.00.

This 18 day of April, 1995.

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FURTHER AFFIANT SAYETH: NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true, to the best of my knowledge and belief.

GENERAL PARTNER:

MFH REALTY LIMITED PARTNERSHIP, a
Delaware limited partnership

BY: JER TE-TWO SERVICES, INC., a Virginia
corporation, its general partner

By: [Signature]
James W. Moffett, Vice President
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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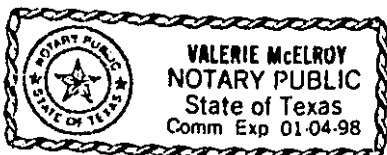
STATE OF TEXAS)

COUNTY OF DALLAS)

SS:

The foregoing instrument was acknowledged before me this 18th day of April, 1995 by
James W. Moffett as Vice President of JER TE-TWO SERVICES, INC., the General Partner of MFH
REALTY LIMITED PARTNERSHIP, the General Partner of the Partnership, on behalf of the
Partnership. He personally appeared before me, is personally known to me and produced a
driver's license as identification.

[NOTARIAL SEAL]



Notary: Valerie McElroy

Print Name: VALERIE McELROY

Notary Public, State of Texas

My commission expires: 1/4/98

FILE ON OR BEFORE DECEMBER 31, 1995 OR PARTNERSHIP
WILL BE SUBJECT TO REVOCATION AND \$500 PENALTY FEE

LIMITED PARTNERSHIP
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra Norman
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

96 JAN -2 PM 1:51

1. Name of Limited Partnership

1a. DOCUMENT #
B95000000146

SHERWOOD GLEN AND WILLOWS APARTMENTS REAL ESTATE LIMITED
PARTNERSHIP

DO NOT WRITE IN THIS SPACE

Mailing Address

1650 Tysons Boulevard
Suite 1600
McLean, VA 22102

Principal Office Address

1650 Tysons Boulevard
Suite 1600
McLean, VA 22102

2. New Mailing Address if Applicable

Suite Apt # etc

City State & Zip

2a. New Principal Office Address if Applicable

Suite Apt # etc

If above addresses are incorrect in any way line through the incorrect information and enter correct address in Block 2 and/or 2a

3. Date Formed or Registered to Do Business in
FLORIDA
4/25/1995

3a. Date of Last Report
N/A

4. State or Country of Formation
DE

City State & Zip

5a. Capital Contributions as Shown
on Record
\$5,100.00

5b. Amount of Capital Contributions in
FLORIDA to date
\$5,100.00

6. FEI Number
54-1757282

Applied For

Not Applicable

7. CERTIFICATE OF STATUS REQUIRED ☐

8. FEES: 1) Filing Fee Computed at a rate of \$7 per \$1,000 on amount entered in 5b or 5a if 5b blank, with a minimum filing fee of \$52.50 and a maximum of \$437.50
2) Supplemental Fee \$138.75 (pursuant to section 607.103, F.S.)
THE AMOUNT DUE SHALL BE NO LESS THAN \$191.25 (\$52.50 + \$138.75) AND NO MORE THAN \$576.25 (\$437.50 + \$138.75)
Note: If the amount entered in 5b is greater than amount entered in 5a, a supplemental affidavit must be submitted along with a separate and appropriate filing fee
MAKE CHECK PAYABLE TO FLORIDA DEPT. OF STATE

9. Name and Address of Current Registered Agent

Corporation Information Services, Inc.
1201 Hays
Tallahassee, FL 32301

10. If changed, new Registered Agent/Office

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite Apt # etc

City

FL Z & Code

10a. Pursuant to the provisions of sections 620.1051 and 620.192 Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192 Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY
MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

11. Name(s) of General Partner(s)

11a. Address of Each General Partner
(Do NOT use Post Office Box Numbers)

11b. City State & Zip Code

11c. Registration
Document Number

MFH Realty Limited Partner-
ship

1650 Tysons Boulevard
Suite 1600

McLean, VA 22102

B940000C9118

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

12. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(k) in the event that the information supplied is deemed exempt from public access. I further certify that the information on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

By: MFH Realty Limited Partnership, General Partner, By: JER TE-TWO Services, Inc.

SIGNATURE

DATE 12/14/95

Bruce T. Cunningham, Jr., Vice President

Typed or Printed Name of General Partner Signing Form

Telephone Number (703) 714-8000

CR2E003 (6/95)