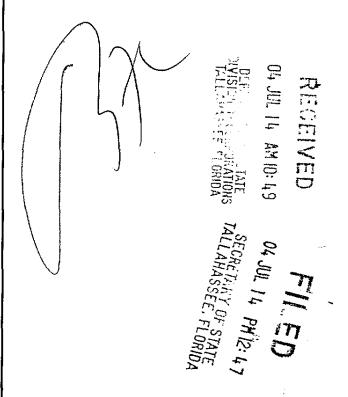
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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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ACCOUNT NO. : 07210000032

PHILADY OF THE PHILAD

REFERENCE : 799411

AUTHORIZATION :

COST LIMIT : \$ 130.00

ORDER DATE: July 12, 2004

ORDER TIME : 9:28 AM

ORDER NO. : 799411-015

CUSTOMER NO: 4500665

CUSTOMER: Julia Schwartz

Morgan, Lewis & Bockius Llp

1701 Market Street

Philadelphia, PA 19103-2921

FOREIGN FILINGS

NAME: GAINESVILLE ASSOCIATES, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

__ PLAIN STAMPED COPY

__ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Justin Cheshire -- EXT# 2909

EXAMINER:

٠	
	APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
	TRANSACT BUSINESS IN FLORIDA
	COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	Gainesville Associates, LLC (Name of foreign limited liability company)
2.	Delaware (Jurisdiction under the law of which foreign limited liability (FEI number, if applicable)
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	July 7, 2004 5. Perpetual
	(Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
6.	Upon filing (Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
	(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.)
7.	2711 Centerville Road, Suite 400
	Wilmington, DE 19808 (Street address of principal office)
8.	If limited liability company is a manager-managed company, check here
9.	The name and usual business addresses of the managing members or managers are as follows:
	Gainesville Associates Intermediate, LLC
	c/o College Park Investments LLC
	10 Campus Blvd., Newtown Square, PA 19073
10.	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
	translation of the certificate under oath of the translator must be submitted.)
11	Nature of business or purposes to be conducted or promoted in Florida: Ownership of rental

Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Gainesville Associates Intermediate, LLC

Typed or printed name of signee By: Joseph M. Macchione

apartments units.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

Gainesville Associates, LLC					
2. The name an	d the Florida street address	of the registere	d agent and office are:		
	Corporat	ion Service	Company		
		(Name)			
		1 Hays Str			·
	Florida street add	lress (P.O. Box <u>N</u>	<u>QT</u> ACCEPTABLE)		
	Tallahassee	. FL	32301		· · · · · · · · · · · · · · · · · · ·

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Might B. Komeizny
(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

PAGE 1

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "GAINESVILLE ASSOCIATES, LLC" 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 TWELFTH DAY OF JULY, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "GAINESVILLE ASSOCIATES, LLC" WAS FORMED ON THE SEVENTH DAY OF JULY, A.D. 2004.

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

3825421

8300

Darriet Smith Windson Source on of Source

AUTHENTICATION: 3226380

040509028 DATE: 07-12-04