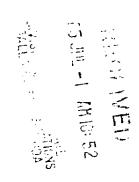
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ACCOUNT NO. : 072100000032

REFERENCE

449163

7112604

AUTHORIZATION

COST LIMIT

: \$ 125.00

ORDER DATE: June 24, 2005

ORDER TIME : 9:49 AM

ORDER NO. : 449163-010

CUSTOMER NO: 7112604

CUSTOMER: Ms. Sharon Crnkovic

Gmh Associates, Inc.

10 Campus Blvd.

Newtown Square, PA 19073

FOREIGN FILINGS

NAME:

SEMINOLE SUITES ASSOCIATES

INTERMEDIATE, LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward -- EXT# 2935

EXAMINER:

SUL MAN



APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

Seminole Suites Associates Intermedia	
(Name of Foreign Lin	nited Liability Company)
Delaware (Jurisdiction under the law of which foreign limited liab company is organized)	3. (FEI number, if applicable)
(Date of Organization)	5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")
(Date first transacted business (See sections 608.501 & 608.50	In Florida, if prior to registration.) 22 F.S. to determine penalty liability)
10 Campus Boulevard, Newtown Square,	PA 19073
(Street Ad	dress of Principal Office)
If limited liability company is a manager-mana	aged company, check here
The name and usual business addresses of the	managing members or managers are as follows:
Seminole Suites Associates Intermedia	ate, LLC
10 Campus Boulevard	
North Company DR 10072	
Newtown Square, PA 19073	
	on 90 days old, duly authenticated by the official having custody of records tocopy is not acceptable. If the certificate is in a foreign language, a e submitted.)
1. Nature of business or purposes to be conducted	ed or promoted in Florida: Real Estate Management
)
	_ `)
(In accordance with section 608.408	an authorized representative of a member. 3(3), F.S., the execution of this document constitutes of perjury that the facts stated herein are true.)
-	brooms T.O. The Manager

Typed or printed name of signee By: John Ferer Manager

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

MEGIDIERO MODITION OF THE OF THE
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.
1. The name of the Limited Liability Company is:
Seminole Suites Associates Intermediate, LLC
2. The name and the Florida street address of the registered agent and office are:
Corporation Service Company
(Name)
, 1201 Hays Street
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Tallahassee FL 32301 City/State/Zip
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, Florida Statutes. Corporation Service Company By: (Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Delaware

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SEMINOLE SUITES ASSOCIATES INTERMEDIATE, 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 TWENTY-SEVENTH DAY OF JUNE, A.D. 2005.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SEMINOLE SUITES ASSOCIATES INTERMEDIATE, LLC" WAS FORMED ON THE TWENTY-FOURTH DAY OF JUNE, A.D. 2005.

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



AUTHENTICATION: 3979498

DATE: 06-27-05

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