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ACCOUNT NO. : 072100000032 REFERENCE AUTHORIZATION COST LIMIT ORDER DATE: December 13, 2007 ORDER TIME : 10:37 AM ORDER NO. : 359246-005 CUSTOMER NO: 4311863 FOREIGN FILINGS NAME: STONEMOR GP LLC XXXX QUALIFICATION (TYPE: <u>LL</u>) PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Debbie Skipper -- EXT# 2948

EXAMINER:

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:

1 StoneMor GP LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
_{2.} Delaware _{3.} 80-0103152
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4. April 2, 2004 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
5. no business has been transacted in Florida 7
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 155 Rittenhouse Circle
Bristol, PA 19007
(Street Address of Principal Office)
3. If limited liability company is a manager-managed company, check here
2. The name and usual business addresses of the managing members or managers are as follows:
Lawrence Miller, William R. Shane, Robert B. Hellman, Jr., Martin L. Lautman,
Fenton R. Talbott, Allen R. Freedman, Peter Grunebaum, Howard Carver; all with
a business address of 155 Rittenhouse Circle, Bristol, PA 19007
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 ranslation of the certificate under oath of the translator must be submitted.)
1. Nature of business or purposes to be conducted or promoted in Florida: death care business
Robert J. Kupits
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.)

Robert J. Kupits, Authorized Representative of a Member
Typed or printed name of signee

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.

StoneMor GP LLC		
If name un	navailable, the alternate name to be used in the state of Florida is:	
2. The nar	me 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 FI 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.

(Signaturé) Deborah D. Skipper Asst. V. Pres.

1. The name of the Limited Lightlity Company is:

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

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The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "STONEMOR GP 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 THIRTEENTH DAY OF DECEMBER, A.D. 2007.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STONEMOR GP LLC" WAS FORMED ON THE SECOND DAY OF APRIL, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

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Harriet Smith Windsor, Secretary of State **AUTHENTICATION:** 6235149

DATE: 12-13-07

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