



State of Rhode Island and Providence Plantations  
Department of State - Business Services Division

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SECRETARY OF STATE  
CORPORATIONS DIV  
2019 JUN 20 AM 11:19

**Application for Registration**  
**FOREIGN Limited Liability Company**  
→ Filing Fee: \$150.00

Pursuant to the provisions of RIGL 7-16-40, the undersigned foreign limited liability company hereby applies for a Certificate of Registration to transact business in the State of Rhode Island, and for that purpose submits the following statement:

|   |                       |                   |
|---|-----------------------|-------------------|
| 1. The name of the limited liability company is:  |                       |                   |
| IP GMH Properties, LLC  |                       |                   |
| Is this company organized in its state or country of formation as a low-profit limited liability company? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> |                       |                   |
| The name, if different, under which it proposes to register and transact business in Rhode Island is:   |                       |                   |
|   |                       |                   |
| 2 The LLC is organized under the laws of: Delaware  |                       |                   |
| 3. The date of its organization is: 6/23/2017   |                       |                   |
| And the period of its duration is: CHECK ONE BOX ONLY   |                       |                   |
| <input checked="" type="checkbox"/> Perpetual (on-going)  |                       |                   |
| <input type="checkbox"/> Date certain for dissolution _____   |                       |                   |
| 4. The name and address of the resident agent/office in Rhode Island is:  |                       |                   |
| Agent Name Capitol Corporate Services, Inc.   |                       |                   |
| Street Address (NOT a P.O. Box) 222 Jefferson Blvd Ste 200  |                       |                   |
| City/Town<br>Warwick  | State<br>RHODE ISLAND | Zip Code<br>02888 |
| 5. The purpose or purposes which it proposes to pursue in the transaction of business in Rhode Island are:<br>real estate holding company                                     |                       |                   |
| Check the box to indicate an attachment <input type="checkbox"/>  |                       |                   |


MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.ri.gov

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|---|-------------------|
| 6. The RI Department of State is appointed the agent of the foreign limited liability company for service of process if, at any time, there is no resident agent or if the resident agent cannot be found or served following the exercise of reasonable diligence.     |                   |
| 7. The address of the office required to be maintained in the state or country of its organization by the laws of that state or, if not so required, of the principal office of the foreign limited liability company is:<br><br>1675 S State St Ste B, Dover, DE 19901 |                   |
| 8. The mailing address for the limited liability company is:<br>10 Campus Blvd<br>Newtown Square PA 19073   |                   |
| 9. Management of the Limited Liability Company:   |                   |
| The Limited Liability Company is to be managed by: <b>CHECK ONLY ONE BOX</b>  |                   |
| <input checked="checked" type="checkbox"/> By its members (If you have checked this box, go to Section 9. (DO NOT fill out the chart below.)  |                   |
| <input type="checkbox"/> By one (1) or more managers (List managers below)  |                   |
| MANAGER   | ADDRESS           |
|   |                   |
|   |                   |
|   |                   |
|   |                   |
| 10. This application must be accompanied by a Certificate of Good Standing/Letter of Status from the state or country of formation dated within 60 days of the date of filing.  |                   |
| 11. Date when this application for Certificate of Registration will be effective: <b>CHECK ONE BOX ONLY</b>   |                   |
| <input checked="checked" type="checkbox"/> Date received (Upon filing)  |                   |
| <input type="checkbox"/> Later effective date (Date must be no more than 90 days from the date of filing) _____   |                   |
| <i>Under penalty of perjury, I declare and affirm that I have examined this Application for Registration, including any accompanying attachments, and that all statements contained herein are true and correct</i>   |                   |
| Type or Print Name of LLC<br>IP GMH Properties, LLC   | Date<br>6/19/2019 |
| Signature of Authorized Person<br>   |                   |

If you have any questions, please call us at (401) 222-3040, Monday through Friday, between 8:30 a.m. and 4:30 p.m., or email [corporations@sos.ri.gov](mailto:corporations@sos.ri.gov).

FORM 450 - Revised: 01/2019

# Delaware

The First State

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I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "IP GMH PROPERTIES, 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 NINETEENTH DAY OF JUNE, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "IP GMH PROPERTIES, LLC" WAS FORMED ON THE TWENTY-THIRD DAY OF JUNE, A.D. 2017.

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



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SR# 20195528720

You may verify this certificate online at [corp.delaware.gov/authver.shtml](http://corp.delaware.gov/authver.shtml)

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Jeffrey W. Bullock, Secretary of State

Authentication: 203055287

Date: 06-19-19