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SELRETARY OF STATE
TALLAHASSEE, FLORID.

COVER LETTER

Registration Section Division of Corporations
TI: SERVICE CAPITAL, LLC
Name of Limited Liability Company
osed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.
turn all correspondence concerning this matter to the following:
ROBIN S. BENTLER Name of Person
ROBIN S. BENTLER Name of Person BENTLER MULDER, LLP Firm/Company
BENTLER MULDER, LLP
Firm/Company Ref
2030 MAIN STREET, 13TH FLOOR
Address
IRVINE, CA 92614
City/State and Zip Code
BENTLER@BENTLERMULDER.COM
E-mail address: (to be used for future annual report notification)
or information concerning this matter, please call:
ROBIN S. BENTLER at (949) 833-1020 Name of Person Area Code & Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Callahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
status & Certificate of Status state of Status is a check for the following amount: \$\frac{1}{3}\$125.00 Filing Fee & \tag{\$\frac{1}{3}}\$160.00 Filing Fee, Certificate of Status & Certified Copy

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: SERVICE CAPITAL, 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.") **DELAWARE** (Jurisdiction under the law of which foreign limited liability company is organized) MARCH 4, 2011 (Date of Organization) (Duration: Year limited liability company will o exist or "perpetual") (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) 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: **ROBERT ANDREWS** Hutton Centre, Suite 330 CA 92707 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: financial services 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 ANDREWS

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.

\$ 30.00 Certified Copy (optional)

5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SERVICE CAPITAL, 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-FIFTH DAY OF SEPTEMBER, A.D. 2012.

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Jetfrey W Bullock, Secretary of State

AUTHENTICATION: 9869193

DATE: 09-25-12

STATE OF DELAWARE CERTIFICATE OF AMENDMENT

Name of Limited	l Liability Company:	ACTION GAT	OR 2, L	LC
The Certificate of as follows:	of Formation of the lin	nited liability co	ompany is I	nereby ame
1. The name	e of the Compar	ny is:		
	SERVICE CAP	ITAL, LLC		
IN WITNESS W	HEREOF, the unde	rsigned have exe	ecuted this	Certificate
the 20TH	day of SEPT	EMBER	, A.	D. 2012
	Bv:	12	M	
	,	Aut	horized Pe	rson(s)
	Na	me: ROBERT A	NDREWS,	Manage
		· ——··	Print or Ty	pe