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ATION SERVICE COMPANY. ACCOUNT NO. : 072100000032 REFERENCE: 809215 4305738 AUTHORIZATION : COST LIMIT : \$ 195.00 ORDER DATE : July 16, 2004 ORDER TIME : 10:30 AM ORDER NO. : 809215-005 CUSTOMER NO: 4305738 CUSTOMER: Ms. Becky Heath Hirschler Fleischer Bldg. 701, Federal Reserve Bank Building 701 East Byrd Richmond, VA 23219 DOMESTIC FILING SCI UNIVERSITY MARKETPLACE NAME: FUND, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY (2 ___ PLAIN STAMPED COPY ___ CERTIFICATE OF GOOD STANDING 🗘 CONTACT PERSON: Darlene Ward - EXT. 2935 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

SCI UNIVERSITY MARKETPLACE FUND, LLC

The name of the Limited Liability Company is:



ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>vialing Address:</u>	
11620 WILSHIRE BOULEVARD	11620 WILSHIRE BOULEVARD	
SUITE 300	SUITE 300	
LOS ANGELES, CA 90025	LOS ANGELES, CA 90025	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Corporation Service	Company
N	ame
1201 Hays Street	
Florida street address	(P.O. Box NOT acceptable)
Tallahassee	FLORIDA 32301
City, St	ate, and 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..

By: _____ Aggistered Agent's Signature

Page 1 of 2 (CONTINUED) ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u> </u>	Name and Address:	
'MGRM" = Managing Member		
MGR	SCI FUND MANAGER, Inc.	
	11620 WILSHIRE BLVD., SUITE 300	
	LOS ANGELES, CA 90025	
Use attachment if necessary)		
, 		

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

By: REBECCA S. HEATH

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

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