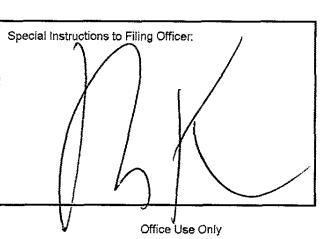
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Examiner's Initials

#### **ARTICLES OF ORGANIZATION**

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SCP/ABL LAKE ST. CLAIR, LLC, a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

SCP/ABL LAKE ST. CLAIR, LLC

### ARTICLE II PRINCIPAL OFFICE

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

25110 Bernwood Drive Suite 101 Bonita Springs, FL 34135

## ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Brit E. Svoboda 25110 Bernwood Drive Suite 101 Bonita Springs, FL 34135

### ARTICLE IV MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles day of 10, 2007.	of Organization have been executed as of the
WITNESSES:	0 > 1
Margary Malouds Print Name Handra Distanta	Brit E. Sveboda
Print Name Mork K. Rasmus	

"MANAGER"

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 of the 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:

SCP/ABL LAKE ST. CLAIR, LLC

2. The name and the Florida street address of the registered agent are:

Brit E. Svoboda 25110 Bernwood Drive Suite 101 Bonita Springs, FL 34135

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: | 0 | 10 | 0 ]

"REGISTERED AGENT"