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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number: 076064003722 Phone : (888)491-1120 Fax Number : (954)343-6962

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FLORIDA LIMITED LIABILITY CO. SCAP.FL 11 LLC

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AUG 1 6 2013 J. BRYAN 8/15/2013

GreenspoonMarder

To: Division of Corporations

Company:

Fax: 1-850-617-6383

Phone:

From: Sharon Sandidge

Fax: 954-333-4134 Phone: 954-761-2934

E-mail: sharon.sandidge@gmlaw.com



NOTES:

Date and time of transmission: 8/15/2013 8:41:14 AM Number of pages including this cover sheet: 4

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ARTICLES OF ORGANIZATION OF SCAP.FL 11 LLC a Florida Limited Liability Company

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

- 1. NAME. The name of the Limited Liability Company is: SCAP.FL 11 LUC (the "Company").
- 2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address for the principal office of the Company is: 7170 E. McDonald Drive, Suite 4, Scottsdale, Arizona 85253.
- 3. MANAGER. Initially, the Company shall be manager managed and the initial manager shall be NEWMGT LLC, a Nevada limited liability company; provided, that the Company may determine, from time to time, to become member managed or change the manager from time to time and the Company reserves the right to update such information through its annual report filings, amendments to the Company's operating agreement, or as otherwise provided by applicable law.
- 4. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: PARACORP INCORPORATED, 236 East 6th Avenue, Lallahassee, FL 32303.

A	The undersigned	has execute	d these	Articles	of	Organization	on the	14	day of	:
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Title: Authorized Representative

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CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE LIMITED LIABILITY COMPANY NAMED BELOW SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: SCAP.FL 11 LLC
- 2. The name and address of the registered agent and office is:

PARACORPINCORPORATED
236 East 6th Avenue
Tallahassee, FL 32303

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 as provided for in Chapter 605, F.S.

Registered Apent

Deta

Date

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