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Division of Corporations Fax Number : (850)205-0383

PROSKAUER ROSE LLP

Account Name : PROSKAUER NO. Account Number : 074673001063 : (561)995-4704 - 7145

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SCP-Capri Township Plaza LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

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:

| (Nat | LLC ic of Foreign (Limited Liability Company) |
|--|--|
| | ic or recogn familio materity company) |
| Delaware Uprisdiction under the law of which to | 3. (FRI number, if applicable) |
| combinis is organized) | caffit turning this interior. It applicables |
| 5/15/07 | 5 Perpetual |
| (Date of Organization) | (Duration: Year limited liability company will exace to- |
| er in the second se | exist or "perpetual") |
| upon qualification | |
| (Data first tea | nsacted business in Florida, if prior to registration.) 08,501 & 608,502 F.S. to determine penalty liability) |
| 300 SW 2nd Street | A CONTRACT OF THE STATE OF THE PROPERTY OF THE STATE OF |
| Cambandala El 2002 | |
| Fort Lauderdale, FL 33301 | (Street Address of Principal Office) |
| | Contest studies of Ethicibil Cities 1/2 |
| | 0 SW 2nd Street, Fort Lauderdale, FL 33301 |
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| nslation of the certificate under outh of the Nature of business or purposes By: SCP-Capri Master By: SCIIST CSI PM By: Rocco Ferrora, Signature of | to be conducted or promoted in Florida: eal estate r 1, LLC, its sole member. LC, Its Minaging member Vice President n member or an authorized representative of a member. ith section 608.408(3), E.S., the execution of this document constitutes |
| By: SCP-Capri Master By: SCP-Capri Master By: SCP-Capri Master By: SCIISS CSI MM By: Rocco Ferrara, Signature of | to be conducted or promoted in Florida: eal estate r. 1. LLC, its sole member. LLC, its Munaging member. Vice President a member or an authorized representative of a member. ith section 608.408(3), F.S. the execution of this document constitutes after the penalties of perjury that the facts stock barcho are true; |
| Nature of business or purposes By: SCP-Capri Master By: SCI-Capri Master By: SCI-Capri Master Signature of the accordance with accordance with a contraction on the contraction of the accordance with a contraction on the contraction of the accordance with a contracti | to be conducted or promoted in Florida: eal estate r 1, LLC, its sole member. LC, Its Minaging member Vice President n member or an authorized representative of a member. ith section 608.408(3), E.S., the execution of this document constitutes |

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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 A FLORIDA. | ND REGIST | ERED AGI | ent in the sta | TE OF | |
|---|-----------|---|----------------|-------|--|
| | | • | | · · | |
| 1. The name of the Limited Liability Compan | y is: | • | g# , | | |
| SCP-Capri Township Plaza LLC | , | | | • | |

| 2. | The name and the Florida street | et address | of th | ie regi | stered | agen | and | office | are: |
|----|---------------------------------|------------|-------|---------|--------|------|-----|--------|------|
| | | • | ** | Z | •••• | | • | • | • |

Corporation Service Company 1201 Hays Street Florida Street Address (P.O. Box NOT ACCEPTABLE) Tallahassee 32301-2525

City/State/Zip.

Having been named as registered ogent 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. - authorized Representative

Filing Fee for Application \$ 100.00

\$ 25.00 Designation of Registered Agent

Certified Copy (optional) 30.00

Certificate of Status (optional)

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Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCP-CAPRI TOWNSHIP PLAZA 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 FIFTEENTH DAY OF MAY, A.D. 2007.

AND I DO HERBEY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SCP-CAPRI TOWNSHIP PLAZA LLC" WAS FORMED ON THE FOURTEENTH DAY OF MAY, A.D. 2007.

DIVISION OF CORPORATIONS

OF MAY 16 AM 8: 56



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Warriet Smith Windsor, Secretary of State

AUTHENTICATION: 5675997

DATE: 05-15-07

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