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DIVISION OF CORPORATIONS

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT: SCI Gateway at Club Fund 21, LLC (Name of Lim	nited Liability Company)	
The enclosed "Application by Foreign Limited Lia Florida," Certificate of Existence, and check are so liability company to transact business in Florida		
Please return all correspondence concerning this n	natter to the following:	
Pamela S. Flint, Paralegal		
	ame of Person)	
Kutak Rock LLP		
	rm/Company)	
\. "	····· Company,	<u> </u>
1650 Farnam Street		SECRETARY OF STATIONS VISION OF CORPORATIONS OF WILL OF STATIONS O
	(Address)	97
		2 COS
Omaha, NE 68102		P CR
	tate and Zip Code)	÷ 12
For further information concerning this matter, ple	ease call:)2
Pamela S. Flint	at (402) 346-6000 ext. 1810	
(Name of Person)	(Area Code & Daytime Telephone Number	ег)
MAILING ADDRESS:	STREET ADDRESS:	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed is a check for the following amount:		
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of	□ \$155.00 Filing Fee & □ \$160.00 Filing Fee, C f Status Certified Copy of Status & (Certificate 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 RECISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

ENGLIS ENGLIS CONTENTS TO INVESTED EXCITED IN THE STATE OF TEXAULT.
1. SCI Gateway at Club Fund 21, 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.")
2. Delaware (Jurisdiction under the law of which foreign limited liability company is organized) 3. (FEI number, if applicable)
4. July 30, 2007 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to, exist or "perpetual")
6. Upon qualificiation
One fleet temperated business in Florida if prior to registeration
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 11620 Wilshire Boulevard, Suite 300
7. 11620 Wilshire Boulevard, Suite 300 Los Angeles, CA 90025
(Street Address of Principal Office)
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:
The Luttringer Family Trust, Collin Luttringer and Julie Luttringer, Trustees
788 Castle Hill Road
Redwood City, CA 94061
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: To acquire and hold interests in real property or a fractional undivided interest therein, and to engage in such other activities relating to or incidental thereto as are necessary to accomplish such purpose.
Pamela S. Flist
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.)
Pamela S. Flint, Authorized Representaive for the Member

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.

1. The name of the Limited Li	ability Company is:	
SCI Gateway at Club Fund 21, LL		
If name unavailable, the alterna	ate name to be used in the state of Florida is:	
2. The name and the Florida st	reet address of the registered agent and office are:	DIVISION OF AUG
Corporation Ser	vice Company	1 7 至
<u></u>	(Name)	2 CORP
1201 Hays Stree	et rida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)	PORATIONS
Tellahassee	FI 32301 City/State/Zip	3 8

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.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCI GATEWAY AT CLUB FUND 21, 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 THIRTIETH DAY OF JULY, A.D. 2007.

DIVISION OF CORPORATIONS



Varriet Smith Windson, Secretary of State

AUTHENTICATION: 5883929

DATE: 07-30-07