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SECRETARY OF STATE SECRETARY OF CORPORATIONS
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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJ	ECT: SCI Gateway at Club Fund 14, LLC (Name of Li	mited Liability Company)	
Florid		Liability Company for Authorization to Transac submitted to register the above referenced fore	
Please	e return all correspondence concerning this	matter to the following:	
	Pamela S. Flint, Paralegal		_
	1)	Name of Person)	
	Kutak Rock LLP		_
	(F	Firm/Company)	O. DIV
			SECRETARY SECRETARY OF CO OT AUG -2
	1650 Farnam Street		- G - FE
		(Address)	2 5
	Omaha, NE 68102		PH 4: 04
	(City/s	State and Zip Code)	Ot ONS
For fu	rther information concerning this matter, p	lease call:	
	Pamela S. Flint	at (402) 346-6000 ext. 1810	
	(Name of Person)	(Area Code & Daytime Telephone Num	_ ber)
MAILING ADDRESS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
Enclos	sed is a check for the following amount: \$\Boxed{\text{\$\subset}\$} \$125.00 \text{ Filing Fee} \Boxed{\text{\$\subset\$}} \$\$130.00 \text{ Filing Fee} \text{\$\subset\$}\$ Certificate of the following amount:		Certificate

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:

1. SCI Gateway a (Name of Fo	nt Club Fund 14, LLC reign Limited Liability Company; must inclu	ide "Limited Liability Company," "L.L.C.," or "LL	.c. *)
	igers or managing members adopting the alte	se of transacting business in Florida and attach a cornate name. The alternate name must include "Lim	
2. Delaware (Jurisdiction under company is organ	er the law of which foreign limited liability or	GEI number, if applicable)	
4. July 30, 2007 (D	ate of Organization) 5	Perpetual (Duration: Year limited liability company will exist or "perpetual")	cease to
6. Upon qualificial	tion (Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	orida, if prior to registration.) to determine penalty liability)	
7. <u>11620 Wilshire</u>	Boulevard, Suite 300		
Los Angeles, C	CA 90025	of Principal Office)	SECE WISID
	(Street Address	or Principal Office)	JG - 87
8. If limited liab	ility company is a manager-managed	company, check here	2 03/1
9. The name and	i usual business addresses of the mana	aging members or managers are as follows	RPORAT
Chan Ho Par	rk and Young Ai Park, husband and wife, a	as joint tenant	STATE RATIONS
4460 Wilshire	e Blvd., #708		
Los Angeles	s, CA 90010		
the jurisdiction under		lays old, duly authenticated by the official having cus y is not acceptable. If the certificate is in a foreign lan nitted.)	
real property or	isiness or purposes to be conducted or a fractional undivided interest therein, and o as are necessary to accomplish such pu	promoted in Florida: To acquire and hold in to engage in such other activities relating to our pose.	nterests in
	Pamela S. 71	7.5 H	
	Signature of a member or an aut	thorized representative of a member. S., the execution of this document constitutes	
	Pamala S. Elint Authorized Penree	entaive 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 Liability Company is:	
SCI Gateway at Club Fund 14, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	OT AUG
Corporation Service Company	1 727
(Name)	2 2
1201 Hays Street	PH 4
Florida Street Address (P.O. Box NOT ACCEPTABLE)	STATE OF H 4: 04
Tellahassee FL 32301	_
City/State/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.

(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 14, 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.

SECRETARY OF STATE DIVISION OF CORPORATIONS



Harriet Sm

Harriet Smith Windsor, Secretary of State

DATE: 07-30-07

AUTHENTICATION: 5883864

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