# M01000005478

(Requestor's Name)  (Address)	500108968895	
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL	09/11/0701004026**130.00	
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#### COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: SCI Gateway at Club Fund 30, LLC			
(Name of Limited Liability Company)			
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please return all correspondence concerning this matter to the following:			
Pamela S. Flint, Paralegal			
(Name of Person)			
Katala Dasta III D			
Kutak Rock LLP	Firm/Company)		
:	i iiii company,		
1650 Farnam Street			
. 10	(Address)		
•	•		
Omaha, NE 68102	(0.1)		
(City)	/State and Zip Code)		
For further information concerning this matter, please call:			
Pamela S. Flint	at (402 ) 346-6000 ext. 1810		
(Name of Person)	(Area Code & Daytime Telephone Number)		
MAILING ADDRESS:	STREET ADDRESS:		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		
Enclosed is a check for the following amount:  □ \$125.00 Filing Fee  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:

SCI Gateway at Club Fund 30, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")    Company
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the writte 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)  (FEI number, if applicable)
4. September 5, 2007  (Date of Organization)  5. Perpetual  (Duration: Year limited liability company will cease to exist or "perpetual")
6. Upon qualificiation  (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
Los Angeles, CA 90025  (Street Address of Principal Office)
<ul> <li>8. If limited liability company is a manager-managed company, check here</li> <li>9. The name and usual business addresses of the managing members or managers are as follows:</li> <li>Levin Family Trust U/A/D 1/22/92, Seymour R. Levin and Judith Levin as Trustees</li> </ul>
16616 Park Lane Place
Los Angeles, CA 90049
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.
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 Liability (	Company is:	
SCI Gateway a	at Club Fund 30, LLC		
If name unav	allable, the alternate name	e to be used in the state of Florida is:	
2. The name	and the Florida street add	iress of the registered agent and office are:	<del></del>
	Corporation Service Con	npany (Name)	07 SECR
	1201 Hays Street Florida Stree	et Address (F.O. Box <u>NOT</u> ACCEPTABLE)	PILED PILED
	Tellahassee	FL 32301 City/State/Zip	AMID: 39 EE, FLORID
			7

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.

Leany (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 30, 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 FIFTH DAY OF SEPTEMBER, A.D. 2007.



Warriet Smith Windson, Secretary of State

AUTHENTICATION: 5976604

DATE: 09-05-07