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SECRETARY OF STATE

M. THOMAS

JUL 1 5 2008

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: SCI Gateway at Tallahassee Fund 6, 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, Para	alegal		
	(Name of Person)	-	
Kutak Rock LLP		_	
	(Firm/Company)		
1650 Farnam Street			
	(Address)	-	
Omaha, NE 68102		_	
(Ci	ty/State and Zip Code)	70 9	
For further information concerning this matter	r, please call:	ALECTER STATE OF THE B	
Pamela S. Flint	at (402) 346-6000	OF STATE	
(Name of Person)	(Area Code & Daytime Telephone Numl	ber S	C
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: \$\sum_\$125.00 \text{ Filing Fee} \sum_\$130.00 \text{ Filing Fe} \text{ Certific.}	ee & \$\sumsymbol{\sumsymbol{\subsymbol{\sin}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	Certificate c 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 REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

SCI Gateway at Tallahassee Fund 6, 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 viconsent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liabili 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 1, 2008 (Date of Organization) 5. Perpetual (Duration: Year limited liability company will cease to exist or "perpetual")	
_{6.} Upon qualification	
(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)	
8. If limited liability company is a manager-managed company, check here	08 JUL 14
9. The name and usual business addresses of the managing members or managers are as follows:	=
Gold Mine Investments, L.L.C.	, I
9675 E. Balancing Rock Road, Scottsdale, AZ 85262	AM II: In
 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of receithe 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. If tractional undivided interest therein, and to engage in such other activities relating to or incidental thereto as are necessary to accomplish such purpose. 	
Parnela S. Fluit	
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	

Typed or printed name of signee

an affirmation under the penalties of perjury that the facts stated herein are true.)

Pamela S. Flint, Authorized Representative of Member

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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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 Tallahassee Fund 6, 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:
C T Corporation System
(Name)
1200 South Pine Island Road
Florida Street Address (P.O. Box NOT ACCEPTABLE)
Plantation, FL 33324
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. Baher Tanius, Assistant Secretary (Signature)
\$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)
 \$ 5.00 Certificate of Status (optional)



PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SCI GATEWAY AT TALLAHASSEE FUND 6, 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 FIRST DAY OF JULY, A.D. 2008.

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080746860

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 6700448

DATE: 07-01-08

You may verify this certificate online at corp.delaware.gov/authver.shtml