

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M08000003300

**FILED**  
**Feb 07, 2011**  
**Secretary of State**

**Entity Name:** SCPF AMERICA LLC

**Current Principal Place of Business:**

C/O WPP, 125 PARK AVE, 4TH FL.  
NEW YORK, NY 10017

**New Principal Place of Business:**

C/O WPP, 100 PARK AVE, 4TH FL.  
NEW YORK, NY 10017

**Current Mailing Address:**

C/O WPP, 125 PARK AVE, 4TH FL.  
NEW YORK, NY 10017

**New Mailing Address:**

C/O WPP, 100 PARK AVE, 4TH FL.  
NEW YORK, NY 10017

**FEI Number:** 26-3108328

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

UNITED CORPORATE SERVICES, INC.  
9200 SOUTH DADELAND BLVD., SUITE 508  
MIAMI, FL 33156 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** READ, NICK  
**Address:** 466 LEXINGTON AVE.  
**City-St-Zip:** NEW YORK, NY 10017

**Title:** MGR  
**Name:** FAREWELL, KEVIN  
**Address:** 100 PARK AVENUE, 4TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10017

**Title:** MGR  
**Name:** NEUMAN, THOMAS O  
**Address:** 100 PARK AVENUE, 4TH FLOOR  
**City-St-Zip:** NEW YORK, NY 10017

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** THOMAS O. NEUMAN

MGR

02/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date