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TOI

Division of Corporations

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Promi

Account Name : C T CORPORATION SYSTEM

Account Number | PCA000000023

Phone

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE SCOTT CARVER IIC, LIMITED PARTNERSHIP

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C. LEWIS

JUL 2 1 2010

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性XAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJ	ECT:	
	Name of Limited Part	norship or Limited Liability Limited Partnership
DOC	JMENT NUMBER:	
	iclosed Statement of Change of are submitted for filing.	Registered Office and/or Registered Agent and
Please	return all correspondence conc	erning this matter to:
·		
	Contact Person	
<u></u>	Pirm/Company	
	Address	
	City, State and Zip Coo	de
	anne.walker@mecorman	
B-1	mail address: (to be used for future an	nual report notification)
For fur	ther information concerning this	s matter, please call:
		at () Area Code and Daytime Telephone Number
	Name of Contact Person	Area Code and Daytime Telephone Number
Enclose	ed is a \$35.00 check made paya	ble to the Florida Department of State.
STREE	et address:	MAILING ADDRESS:
	ation Section	Registration Section
	n of Corporations	Division of Corporations
	Building	P. O. Box 6327
	recutive Center Circle ssee, FL 32301	Tallahassee, FL 32314

INHS04 (01/06)

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1,	Scott Carver IIC,				
,	ame of Limited Partnership or Lin	mited Liability	Limited Partne	rship	
2	05/15/2009	3	A090	00000329	
Date of filing/registration in Florida		Florida document number			
4. The name of the propertment of State	registered agent and the registered	office address	s as shown on th	e records of the Florids	
	CORPORATION SE	RVICE COM	PANY		
	Nat	me		-	
	1201 HAY	S STREET			
	Add	ress		_	
	TALLAHASSEE	FL 32301-25	25		
	City, State	and Zip			-
5. The name and Flo	orida street address of the new rag	istered agent a	nd/or office:	ALL	
	C T Corporat	ion System			֝֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
	Nar	ne		ASS	֓֞֓֞֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓
	1200 South Pin	e Island Road		. m-	ζ .
	Florida street address (P.	O. Box not ac	oopiable)	- '. ' 	
	Plantation,	न	T. 33324	· :	ハード
	City, State		•	- 25°	
& Such abandara ini	are effective when filed by the Flo	mids Denestra	ent of State	7-	
Signature of General	McCrou	wide propie in	ant or otator		
I hereby accept the ap comply with the provi	Nichol McCroy, Vice Preside oppointment as registered agent an interest of all statutes relative to the han accept the obligations of my the statute of the statute of my the	d agree to act proper and o	in this capacity omplete perform		
Rebocca Barth,	Assistant Secretary			•	
Dillog Man	c24 (A)				

Certified Copy (optional): \$52.50

POWER OF ATTORNEY

NOTICE IS HEREBY GIVEN THAT McCormack Baron Salazar, Inc. (the "Corporation"), a corporation incorporated under the laws of the state of Missouri and the direct or indirect owner of the subsidiary entities shown on Schedule A attached hereto, does hereby appoint Nichol McCroy and Sandy Gilliss, employees of CT Corporation and acting solely in the capacity as employees of CT Corporation, as attorney-in-fact for the Corporation to act for the Corporation and in the Corporation's name for the limited purposes authorized herein.

The Corporation and the subsidiary entities listed, having taken all necessary steps to authorize the changes, hereby grants its attorney-in-fact the power to execute the documents necessary to change the Corporation's and the subsidiary entitles' registered agent and registered office, or the agent and office of similar import, in any state to CT Corporation; and also the principal address, mailing address and business address, in any state, as directed and authorized by the Corporation. The attorney-in-fact will not make such changes without the prior approval of the Corporation.

In the execution of any documents necessary for the sole, limited purpose, set forth herein, Nichol McCroy and Sandy Gilliss shall exercise the power of Vice President, Secretary, Manager, and/or Member.

This Power of Attorney expires when revoked by the undersigned.

IN WITNESS WHEREOF the undersigned has executed this Power of Attorney on this 8th day of July 2010.

McCORMACK BARON SALAZAR, INC., a Missouri dorporation

By:

Hillary B. Zimmerman, Vice President

STATE OF MISSOURI)

Output

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On this 8th day of July 2010, before me, the undersigned Notary Public in and for said State, personally appeared Hillary B. Zimmerman, personally known to me to be the person whose name is subscribed to the within instrument, and acknowledged to me she executed the same in her authorized capacity and that by her signature on the instrument the entity upon behalf of which the she acted, executed this instrument.

Witness my hand and official scal.

Marie a. Moon Notary Public

My commission expires: 3/17/14

Exhibit A

Brisben Florida I Limited Partnership Buchanan Bay, Ltd. Grand Savannah Club, Ltd. MBS Construction Services, Inc. MBS GP 19, L.L.C. MBS GP 22, L.L.C. MBS GP 32, L.L.C. MBS GP 39, L.L.C. MBS GP 124, L.L.C. MBS GP 125, L.L.C. MBS GP 133, L.L.C. MBS GP 176, L.L.C. MBS Scott Carver GP, LLC MBS-Saxon GP, L.L.C. McCormack Baron Salazar, Inc. Saxon Manor Isles Apartments Limited Partnership Scott Carver GP, Inc. Scott Carver IIA, Limited Partnership Scott Carver IIB, Limited Partnership Scott Carver IIC, Limited Partnership The Palms at Vero Beach Limited Partnership The Park at Palm Bay Limited Partnership Tierra Vista I Limited Partnership Urban Strategies, Inc.