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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM

LIMITED PARTNERSHIP REINSTATEMENT 2013

FLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

CR2E038 (1/11)

DOCUMENT # B95000000045

1. Name of Limited Partnership

Barkley Place II Limited Partnership

2. Principal Office Address - No P.O. Box #	3. Mailing Office Address
621 East Pratt Street	621 East Pratt Street
Suite, Apt. #, etc. Suite 600	Suite, Apt. #, etc. Suite 600
City & State Baltimore, Maryland	City & State Baltimore, Maryland
Zip 21202 County USA	Zip 21202 County USA

4. Date Formed or Registered To Do Business in Florida 2/8/95

5. FEI Number 52-1596586 ☐ Applied For ☐ Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐ $8.75 Additional Fee is required for a Certificate of Status

8. Name and Address of Current Registered Agent

Name: CT Corporation System

Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road

Suite, Apt. #, Etc.

City: Plantation FL Zip Code: 33324

7. FEES:
Filing Fee(s): $411.25 for each year due this office.
Supplemental Fee(s): $68.75 for each year due this office.
Penalty Fee(s): $500 for each year or part thereof limited partnership revoked on our records.

E-mail Address: Brooks.Martin@munimae.com
E-Mail address to be used for future annual report notices.

9. Pursuant to the provisions of section 620.1010 or 620.1020, Florida Statutes, I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Chapter 620, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment) Connie Bryan (REGISTERED AGENT MUST SIGN) Connie Bryan DATE 12/10/2013

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10. Name(s) of General Partner(s)	Address of Each General Partner (Do NOT Use Post Office Box Number)	City, State and Zip Code	10a. Registration Document Number
SCA SUCCESSOR II, INC.	621 East Pratt Street	Baltimore, MD 21202	F04000002981

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for exemptions contained in Chapter 119, Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Chapter 119, F.S. In the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath; I further certify that I am a General Partner of the limited partnership, member or manager empowered to execute this report as required by chapter 620, Florida Statutes. I am aware that false information submitted on a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SIGNATURE Laura M. Tucker DATE 11/14/13

Laura M. Tucker, Vice President

Typed or Printed Name of General Partner Signing Form Laura M. Tucker Telephone Number 410-779-1225

K. ASHTON

292

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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LP/LLLP REINSTATEMENT
BARKLEY PLACE II LIMITED PARTNERSHIP

Certificate of Status	0
Certified Copy	0
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Estimated Charge	$1,000.00

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