

# **2007 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M06000006699

**FILED**  
**Oct 08, 2007**  
**Secretary of State**

**Entity Name:** MBS GP 124, L.L.C.

**Current Principal Place of Business:**

1415 OLIVE STREET, SUITE 310  
ST. LOUIS, MO 63103

**New Principal Place of Business:**

**Current Mailing Address:**

1415 OLIVE STREET, SUITE 310  
ST. LOUIS, MO 63103

**New Mailing Address:**

FEI Number: 73-1730555      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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: SHERYL A. GIBBS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGRM ( ) Delete  
Name: MUDCO 4, INC.,  
Address: 1415 OLIVE STREET, SUITE 310  
City-St-Zip: ST. LOUIS, MO 63103

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: MGRM ( ) Delete  
Name: TIERRA VISTA I SPECI, AL COMPANY  
Address: 1415 OLIVE STREET, SUITE 310  
City-St-Zip: ST. LOUIS, MO 63103

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: HILLARY B. ZIMMERMAN

V.P.

10/08/2007

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