STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

ARTICLES OF INCORPORATION

R.S. 12:1-202



Domestic Business Corporation
Enclose \$75 Filing Fee
Make remittance payable to Secretary of State
Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

TE	OF
ISH	//COUNTY OF
1.	The name of this corporation is:
2.	The corporation is formed for the purpose of: (check one) a. () Engaging in any lawful business or activity for which corporations may be formed under this Chapter. b. ()
	(use for limited corporate activity)
3.	The duration of this corporation is: (may be perpetual)
4.	The number of shares which the corporation shall have authority to issue is:
5.	The name and address of each incorporator is:
6.	The street address, not a post office box only, of the corporation's initial registered office is:
7.	The street address, not a post office box only, of the corporation's initial principal office is:
8.	The name and street address, not a post office box only, of the corporation's initial registered agent is:
9.	The names and street addresses of the corporation's initial directors are:
10.	The protection against liability of directors and officers that is provided by R.S. 12:1-832 is accepted unless, otherwise, specified below:
	a. () rejected (statement of rejection)
	b. () limited(statement of limitations)
11.	Other provisions:

Incorporate	or Signature:
On this day of 20, before m	e, personally appeared,
to me known to be the person described in and who executed the forego	e, personally appeared, oing instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printed N	Jame, and Notary/Bar Roll Number
WRITTEN CONSE	ENT TO APPOINTMENT
I hereby acknowledge and accept the appointment of reg	ristered agent for and on behalf of the above named corporation.
F	Registered agent(s) signature(s):
_	
-	
Sworn to and subscribed before me, the undersigned Notary Public, on	this date:
Notary Signature, Printed N	Jame, and Notary/Bar Roll Number
SS399 Rev. 01/24	

NOTE: A corporation is a complex form of business structure. This form contains only the minimum provisions required by law to be set forth in Articles of Incorporation. Additional provisions may be advisable or necessary, depending on the specific needs of each corporation. Consideration should be given to the advantages and disadvantages of incorporating, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney, and tax and other business advice from an accountant.

- 1. File the Articles of Incorporation, which contains a Written Consent to Appointment (both portions signed before a notary), and the requisite \$75 filing fee with the Secretary of State's office.
- 2. The Articles of Incorporation may be delivered to the Secretary of State's office in advance, for filing as of any specified date (and any given time on such date) within 90 days after the date of delivery. Requests should be made in writing and must be submitted along with the Articles of Incorporation.
- 3. Please call the Internal Revenue Service at (800) 829-4933 for information to obtain a corporation's federal tax identification number.
- 4. If the Articles of Incorporation are filed within five (5) working days (exclusive of legal holidays) after acknowledgement, the corporate existence shall begin as of the time of such acknowledgement.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

ARTICLES OF INCORPORATION

R.S. 12:1-202



Domestic Business Corporation
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TE	OF
ISH	//COUNTY OF
1.	The name of this corporation is:
2.	The corporation is formed for the purpose of: (check one) a. () Engaging in any lawful business or activity for which corporations may be formed under this Chapter. b. ()
	(use for limited corporate activity)
3.	The duration of this corporation is: (may be perpetual)
4.	The number of shares which the corporation shall have authority to issue is:
5.	The name and address of each incorporator is:
6.	The street address, not a post office box only, of the corporation's initial registered office is:
7.	The street address, not a post office box only, of the corporation's initial principal office is:
8.	The name and street address, not a post office box only, of the corporation's initial registered agent is:
9.	The names and street addresses of the corporation's initial directors are:
10.	The protection against liability of directors and officers that is provided by R.S. 12:1-832 is accepted unless, otherwise, specified below:
	a. () rejected (statement of rejection)
	b. () limited(statement of limitations)
11.	Other provisions:

Incorporate	or Signature:
On this day of 20, before m	e, personally appeared,
to me known to be the person described in and who executed the forego	e, personally appeared, oing instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printed N	Jame, and Notary/Bar Roll Number
WRITTEN CONSE	ENT TO APPOINTMENT
I hereby acknowledge and accept the appointment of reg	ristered agent for and on behalf of the above named corporation.
F	Registered agent(s) signature(s):
_	
-	
Sworn to and subscribed before me, the undersigned Notary Public, on	this date:
Notary Signature, Printed N	Jame, and Notary/Bar Roll Number
SS399 Rev. 01/24	

NOTE: A corporation is a complex form of business structure. This form contains only the minimum provisions required by law to be set forth in Articles of Incorporation. Additional provisions may be advisable or necessary, depending on the specific needs of each corporation. Consideration should be given to the advantages and disadvantages of incorporating, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney, and tax and other business advice from an accountant.

- 1. File the Articles of Incorporation, which contains a Written Consent to Appointment (both portions signed before a notary), and the requisite \$75 filing fee with the Secretary of State's office.
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- 3. Please call the Internal Revenue Service at (800) 829-4933 for information to obtain a corporation's federal tax identification number.
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



ARTICLES OF INCORPORATION

(R.S. 12:203)

Domestic Non-Profit Corporation Non-Stock Corporations Only Enclose \$75 filing fee Make remittance payable to Secretary of State Do not send cash Return to: Commercial Division
P.O. Box 94125
Baton Rouge, LA 70804-9125
(225) 925-4704
www.sos.la.gov

STATE OF LOUISIANA
PARISH OF
1. The name of this corporation is:
 2. This corporation is formed for the purpose of : (check one) () Engaging in any lawful activity for which corporations may be formed under Chapter 2, Title 12, of the La. Revised Statutes (Non-Profit Corporation Law) ()
3. The duration of this corporation is: (may be perpetual)
4. This corporation is a nonprofit corporation.
5. The location and municipal address (not a P.O. Box only) of this corporation's registered office is:
6. The full name and municipal address (not a P.O. Box only) of each of this corporation's registered agent(s) is/are:
7. The full name and address of each incorporator of this corporation is:
8. The corporation's initial board of directors, municipal addresses (not a P.O. Box only) and term of office are: Name(s)/Address(es) Term of Office

10. Other Provisions:

9. This corporation is to be organized on a non-stock basis.

	Incorporator(s) Signature(s):	
On this	day of	, 20, before me, persona
appeared		, to me known to be the persor
	NC	otary
I hereby ackr	NT'S AFFIDAVIT AND ACKNO	WLEDGEMENT OF ACCEPTANCE
I hereby ackr named corpo	NT'S AFFIDAVIT AND ACKNO nowledge and accept the appoint oration.	WLEDGEMENT OF ACCEPTANCE ntment of registered agent for and on behalf of the
I hereby ackr named corpo	NT'S AFFIDAVIT AND ACKNO	WLEDGEMENT OF ACCEPTANCE
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NOTE:

A corporation is a complex form of business structure. This form contains only the minimum provisions required by law to be set forth in Articles of Incorporation. Additional provisions may be advisable or necessary, depending on the specific needs of each corporation. Those corporations intending to apply for a tax exempt status with the Internal Revenue Service may be required to add information not included on this form. Please call the Internal Revenue Service at (800) 829-4933 for information to obtain a corporation's federal tax identification number. Consideration should be given to the advantages and disadvantages of incorporating, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney and tax and other business advice from an accountant.

- 1. File the Articles of Incorporation, along with an affidavit of registered agent, and the requisite \$75 filing fee with the secretary of state.
- 2. The Articles of Incorporation may be delivered to the secretary of state in advance, for filing as of any specified date (and any given time on such date) within 30 days after the time of delivery. Requests should be made in writing and must be submitted along with the Articles of Incorporation.
- 3. Upon filing with our office, you will receive a certified copy of the Articles and a Certificate of Incorporation. Within 30 days after filing the Articles of Incorporation with the Secretary of State's Office, a copy of the Articles of Incorporation certified by the secretary of state and a copy of the Certificate of Incorporation must be filed with the office of the recorder of mortgages in the parish where the corporation's registered office is located.
- 4. If the Articles of Incorporation are filed within five working days (exclusive of legal holidays) after acknowledgment, the corporate existence shall begin as of the time of such acknowledgment.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



ARTICLES OF INCORPORATION

(R.S. 12:203)

Domestic Non-Profit Corporation Non-Stock Corporations Only Enclose \$75 filing fee Make remittance payable to Secretary of State Do not send cash Return to: Commercial Division
P.O. Box 94125
Baton Rouge, LA 70804-9125
(225) 925-4704
www.sos.la.gov

STATE OF LOUISIANA
PARISH OF
1. The name of this corporation is:
 2. This corporation is formed for the purpose of : (check one) () Engaging in any lawful activity for which corporations may be formed under Chapter 2, Title 12, of the La. Revised Statutes (Non-Profit Corporation Law) ()
3. The duration of this corporation is: (may be perpetual)
4. This corporation is a nonprofit corporation.
5. The location and municipal address (not a P.O. Box only) of this corporation's registered office is:
6. The full name and municipal address (not a P.O. Box only) of each of this corporation's registered agent(s) is/are:
7. The full name and address of each incorporator of this corporation is:
8. The corporation's initial board of directors, municipal addresses (not a P.O. Box only) and term of office are: Name(s)/Address(es) Term of Office

10. Other Provisions:

9. This corporation is to be organized on a non-stock basis.

	Incorporator(s) Signature(s):	
On this	day of	, 20, before me, persona
appeared		, to me known to be the persor
	NC	otary
I hereby ackr	NT'S AFFIDAVIT AND ACKNO	WLEDGEMENT OF ACCEPTANCE
I hereby ackr named corpo	NT'S AFFIDAVIT AND ACKNO nowledge and accept the appoint oration.	WLEDGEMENT OF ACCEPTANCE ntment of registered agent for and on behalf of the
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- 1. File the Articles of Incorporation, along with an affidavit of registered agent, and the requisite \$75 filing fee with the secretary of state.
- 2. The Articles of Incorporation may be delivered to the secretary of state in advance, for filing as of any specified date (and any given time on such date) within 30 days after the time of delivery. Requests should be made in writing and must be submitted along with the Articles of Incorporation.
- 3. Upon filing with our office, you will receive a certified copy of the Articles and a Certificate of Incorporation. Within 30 days after filing the Articles of Incorporation with the Secretary of State's Office, a copy of the Articles of Incorporation certified by the secretary of state and a copy of the Certificate of Incorporation must be filed with the office of the recorder of mortgages in the parish where the corporation's registered office is located.
- 4. If the Articles of Incorporation are filed within five working days (exclusive of legal holidays) after acknowledgment, the corporate existence shall begin as of the time of such acknowledgment.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



NOTICE OF CHANGE OF REGISTERED OFFICE AND/OR CHANGE OF REGISTERED AGENT

(R.S. 12:236)

Enclose \$25 filing fee
Domestic Non Profit Corporation
Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

Corporation Name:				
CHANGE	OF LOCATION	OF REGISTERED	OFFICE	
Notice is hereby given that the Boa	rd of Directors o	of the above named	d corporation has a	uthorized a change in the
location of the corporation's register	red office. The	new registered offi	ice is located at:	
	Tc	be signed by an office	r or a director	 Date
Cl	HANGE OF REC	SISTERED AGENT	Γ(S)	
Notice is hereby given that the Boathe corporation's registered agent(follows:	rd of Directors on the state of Directors of State of Directors of State of	of the above named and address(es) o	d corporation has a of the new registere	uthorized the change of ed agent(s) is/are as
	Pr	esident, Vice President	or Secretary	Date
AGENT'S ACCEP	TANCE AND A	CKNOWLEDGEM	ENT OF APPOINT	MENT
I hereby acknowledge and accept				
corporation.	пе арропшнети	or registered agen	it(3) for and on ben	an or the above harned
Sworn to and subscribed before m	e, the undersign	ed Notary Public, c	on this date:	
Nota	ry Signature, Print	ed Name and Notary	//Bar Roll #	

SS354 Rev. 01/24 (See instructions on back)

- 1. This form is to be used when an existing domestic non profit corporation changes the location of its registered office or changes its registered agent(s), or both.
- 2. The Change of Location of Registered Office must be authorized by the Board of Directors of the corporation, and signed by an officer or director.
- 3. The Change of Registered Agent(s) must be signed by the corporation's President, Vice President or Secretary and the new registered agent(s) must sign the acknowledgment and acceptance of their appointment before a notary public. The notice of change should be filed within thirty (30) days after the change.
- 4. A corporation may also change the location of its registered office or name of its registered agent by including the change in the annual report required by R.S. 12:205.1.
- 5. A duplicate original or certified copy of this form should be filed with the clerk of court of the parish in which the corporation's registered office is located (or with the recorder of mortgages in the Orleans Parish). If a change of registered office is from one parish to another, a duplicate original or certified copy of this form should be filed with the clerk of court (or with the recorder of mortgages in the Orleans Parish) in which the new registered office is located, as well as in parish from which the registered office is changed.

STATE OF LOUISIANA SECRETARY OF STATE



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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
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NOTICE OF CHANGE OF REGISTERED OFFICE AND/OR CHANGE OF REGISTERED AGENT

(R.S. 12:236)

Enclose \$25 filing fee
Domestic Non Profit Corporation
Make remittance payable to Secretary of State

Do Not Send Cash

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P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

Corporation Name:				
CHANGE	OF LOCATION	OF REGISTERED	OFFICE	
Notice is hereby given that the Boa	rd of Directors o	of the above named	d corporation has a	uthorized a change in the
location of the corporation's register	red office. The	new registered offi	ice is located at:	
	Tc	be signed by an office	r or a director	Date
Cl	HANGE OF REC	SISTERED AGENT	Γ(S)	
Notice is hereby given that the Boathe corporation's registered agent(follows:	rd of Directors on the state of Directors of State of Directors of State of	of the above named and address(es) o	d corporation has a of the new registere	uthorized the change of ed agent(s) is/are as
	Pr	esident, Vice President	or Secretary	Date
AGENT'S ACCEP	TANCE AND A	CKNOWLEDGEM	ENT OF APPOINT	MENT
I hereby acknowledge and accept				
corporation.	пе арропшнети	or registered agen	it(3) for and on ben	an or the above harned
Sworn to and subscribed before m	e, the undersign	ed Notary Public, c	on this date:	
Nota	ry Signature, Print	ed Name and Notary	//Bar Roll #	

SS354 Rev. 01/24 (See instructions on back)

- 1. This form is to be used when an existing domestic non profit corporation changes the location of its registered office or changes its registered agent(s), or both.
- 2. The Change of Location of Registered Office must be authorized by the Board of Directors of the corporation, and signed by an officer or director.
- 3. The Change of Registered Agent(s) must be signed by the corporation's President, Vice President or Secretary and the new registered agent(s) must sign the acknowledgment and acceptance of their appointment before a notary public. The notice of change should be filed within thirty (30) days after the change.
- 4. A corporation may also change the location of its registered office or name of its registered agent by including the change in the annual report required by R.S. 12:205.1.
- 5. A duplicate original or certified copy of this form should be filed with the clerk of court of the parish in which the corporation's registered office is located (or with the recorder of mortgages in the Orleans Parish). If a change of registered office is from one parish to another, a duplicate original or certified copy of this form should be filed with the clerk of court (or with the recorder of mortgages in the Orleans Parish) in which the new registered office is located, as well as in parish from which the registered office is changed.

STATE OF LOUISIANA SECRETARY OF STATE



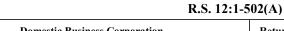
Commercial Division (225) 925-4704

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Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

STATEMENT OF CHANGE OF REGISTERED OFFICE, PRINCIPAL OFFICE, AND/OR CHANGE OF REGISTERED AGENT (BY CORPORATION)





Domestic Business Corporation
Enclose \$25 Filing Fee
Make remittance payable to Secretary of State
Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

* Mandatory Field
*Corporation Name:
*Current Registered Office Address:
Notice is hereby given that the above named corporation has authorized a change in the location of the corporation's registered office to:
*Current Principal Office Address:
Notice is hereby given that the above named corporation has authorized a change in the location of the corporation's principal office to:
*Current Registered Agent's Name and Address:
Notice is hereby given that the above named corporation has authorized a change in the name and address of the registered agent to:
Notice is hereby given that the above named corporation has authorized a change in the <i>address ONLY</i> of the current registered agent to:
To be signed by the Chairman of the Board, the President, or another of its officers Date
WRITTEN CONSENT TO APPOINTMENT
I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above named corporation.
Registered agent(s) signature(s):
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary Signature, Printed Name, and Notary/Bar Roll Number SS502 Rev. 01/24

- 1. This form is to be used when an existing domestic business corporation changes the location of its registered office, principal office, registered agent, registered agent address, or any combination thereof.
- 2. This form must be signed by the Chairman of the Board of Directors, the President, or another of the corporation's officers. If a new registered agent is being appointed, he must sign the Written Consent to Appointment before a notary public.
- 3. The changes made on this form may also be made on the annual report, if due, as required by R.S. 12:1-1621.

STATE OF LOUISIANA SECRETARY OF STATE



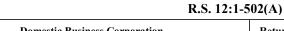
Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

STATEMENT OF CHANGE OF REGISTERED OFFICE, PRINCIPAL OFFICE, AND/OR CHANGE OF REGISTERED AGENT (BY CORPORATION)





Domestic Business Corporation
Enclose \$25 Filing Fee
Make remittance payable to Secretary of State
Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

* Mandatory Field
*Corporation Name:
*Current Registered Office Address:
Notice is hereby given that the above named corporation has authorized a change in the location of the corporation's registered office to:
*Current Principal Office Address:
Notice is hereby given that the above named corporation has authorized a change in the location of the corporation's principal office to:
*Current Registered Agent's Name and Address:
Notice is hereby given that the above named corporation has authorized a change in the name and address of the registered agent to:
Notice is hereby given that the above named corporation has authorized a change in the <i>address ONLY</i> of the current registered agent to:
To be signed by the Chairman of the Board, the President, or another of its officers Date
WRITTEN CONSENT TO APPOINTMENT
I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above named corporation.
Registered agent(s) signature(s):
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary Signature, Printed Name, and Notary/Bar Roll Number SS502 Rev. 01/24

- 1. This form is to be used when an existing domestic business corporation changes the location of its registered office, principal office, registered agent, registered agent address, or any combination thereof.
- 2. This form must be signed by the Chairman of the Board of Directors, the President, or another of the corporation's officers. If a new registered agent is being appointed, he must sign the Written Consent to Appointment before a notary public.
- 3. The changes made on this form may also be made on the annual report, if due, as required by R.S. 12:1-1621.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



CHANGE OF DIRECTORS AND/OR OFFICERS OF A CORPORATION

Enclose \$25 filing fee Domestic Corporation (Business or Non Profit) Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704

www.sos.la.gov

REMOVAL	OF DIRECTORS AND/OR OFFICERS	
Notice is hereby given that the Board of the following: <i>Only the titles indicated w</i>	Directors of the above named corporation has authorized the rerill be removed.	moval of
Name and Title	Name and Title	
Name and Title	Name and Title	
Name and Title	Name and Title	
	To be signed by an officer or a director N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the additional be added.	Date
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i>	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addi be added.	
otice is hereby given that the Board of D	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addi	
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i>	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addi be added.	
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i> Name and Title	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addition be added. Municipal Address	
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i> Name and Title Name and Title	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addibbe added. Municipal Address Municipal Address	

(See instructions on back) SS354A Rev. 01/24



2. The Change of Director(s) and/or Officer(s) must be authorized by the Board of Directors of the corporation, and signed by an officer or director.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



CHANGE OF DIRECTORS AND/OR OFFICERS OF A CORPORATION

Enclose \$25 filing fee Domestic Corporation (Business or Non Profit) Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704

www.sos.la.gov

REMOVAL	OF DIRECTORS AND/OR OFFICERS	
Notice is hereby given that the Board of the following: <i>Only the titles indicated w</i>	Directors of the above named corporation has authorized the rerill be removed.	moval of
Name and Title	Name and Title	
Name and Title	Name and Title	
Name and Title	Name and Title	
	To be signed by an officer or a director N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the additional be added.	Date
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i>	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addi be added.	
otice is hereby given that the Board of D	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addi	
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i>	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addi be added.	
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i> Name and Title	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addition be added. Municipal Address	
otice is hereby given that the Board of D e following: <i>Only the titles indicated will</i> Name and Title Name and Title	N OF DIRECTORS AND/OR OFFICERS irectors of the above named corporation has authorized the addibbe added. Municipal Address Municipal Address	

(See instructions on back) SS354A Rev. 01/24



2. The Change of Director(s) and/or Officer(s) must be authorized by the Board of Directors of the corporation, and signed by an officer or director.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809

OF LOUGH

DISCLOSURE OF OWNERSHIP

(R.S. 12:1-1622, 12:205 E and 12:304 A (11))

Enclose \$20 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

State of	Parish	h/County of
BEFORE ME, the undersigned Nappeared the undersigned who,		ounty herein above shown, personally came and depose and say that:
	Corporation Name	
who hold ownership interest of fi of five percent or more in the cor	ive percent or more in the cor rporation and, if anyone is ho	and addresses of all persons or corporate entities rporation or who hold by proxy the voting power olding stock in his own name that actually belongs stock held pursuant to a counter letter.
Persons or corporate el	ntities owning 5% or more:	
Name		Address
Name		Address
Name		Address
2. Persons or corporate el	ntities who hold by proxy the	voting power of 5% or more:
name		Address
name		Address
Name		Address
3. Stock held for others ar	nd for whom held:	
Name		Address
For Whom Held		Address
Name		Address
For Whom Held		Address
Name		Address
For Whom Held		Address
Sworn to and subscribed before	me, the undersigned Notary	Public, on this date:
Corporation Rep	presentative	Notary Signature, Printed Name and Notary /Bar Ro

SS320 Rev. 01/24 (See instructions on back)

- 1. This form is be used when an existing corporation intends to contract with the state. This requirement does not apply to non profit corporations organized on a "non stock" basis, any agreement entered between the state and a corporation for electric or gas service, publicly traded corporations, or state chartered banks.
- 2. You will receive a copy marked "received and filed" by the secretary of state. You may furnish a photostatic copy of the "filed" form to the appropriate state agency.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809

OF LOUGH

DISCLOSURE OF OWNERSHIP

(R.S. 12:1-1622, 12:205 E and 12:304 A (11))

Enclose \$20 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

State of	Parisl	h/County of	
BEFORE ME, the undersigned Notary in and for the parish/county herein above shown, personally came and appeared the undersigned who, after being duly sworn, did depose and say that:			
	Corporation Name		
who hold ownership interest of fi of five percent or more in the cor	ive percent or more in the cor rporation and, if anyone is ho	and addresses of all persons or corporate entities rporation or who hold by proxy the voting power olding stock in his own name that actually belongs stock held pursuant to a counter letter.	
Persons or corporate e	ntities owning 5% or more:		
Name		Address	
Name		Address	
Name		Address	
2. Persons or corporate e	ntities who hold by proxy the	voting power of 5% or more:	
Name		Address	
Name		Address	
Name		Address	
3. Stock held for others ar	nd for whom held:		
Name		Address	
For Whom Held		Address	
Name		Address	
For Whom Held		Address	
Name		Address	
For Whom Held		Address	
Sworn to and subscribed before	me, the undersigned Notary	Public, on this date:	
Corporation Rep	 presentative	Notary Signature, Printed Name and Notary /Bar Ro	

SS320 Rev. 01/24 (See instructions on back)

- 1. This form is be used when an existing corporation intends to contract with the state. This requirement does not apply to non profit corporations organized on a "non stock" basis, any agreement entered between the state and a corporation for electric or gas service, publicly traded corporations, or state chartered banks.
- 2. You will receive a copy marked "received and filed" by the secretary of state. You may furnish a photostatic copy of the "filed" form to the appropriate state agency.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



RESERVATION OF CORPORATE/LIMITED LIABILITY COMPANY/ L3C/PARTNERSHIP NAME

(R.S. 12:1-402A, 12:204, 12:303, 12:1307, 12:1344)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State, State of Louisia	na is requested to reserve the following name for u	se as a
corporate/limited liability company/L3C/	partnership name:	
Said name is requested to be reserved	on behalf of	
for a period of 120 days from the date o	f your receipt of this application.	
	Name	
	Address	
	City/State/Zip	
	Area code/phone number	
	Submitted by:	
		ate

If the requested name is not available, please return this application and the filing fee to the above.

- 1. Names can be reserved for 120 days by filing an application for reservation and the requisite \$25 filing fee with the secretary of state.
- 2. Name availability can be preliminarily checked by calling the Secretary of State's Office; however, telephone name searches are preliminary checks only and should not be relied upon.
- 3. Corporate names (for business corporations) must end with or include the words "Corporation," "Incorporated" or "Limited," or the abbreviation of any of these words, or may instead contain the word "Company" or the abbreviation "Co." if not immediately preceded by the word "and" or the symbol "&."
- 4. Limited liability company names should contain the words "Limited Liability Company," or the abbreviation "L.L.C.," or "L.C." No limited liability company shall include in its name any words which deceptively or falsely suggest a charitable or nonprofit nature.
- 5. L3C names shall contain the words "Limited Liability Company," or the abbreviation "L3C" or the abbreviation "I3c."
- 6. Corporate and limited liability company names shall not imply that the company is an administrative agency of any parish or of this state or of the United States.
- 7. Subject to limited exceptions, a corporate, limited liability company, L3C or partnership name must be distinguishable from other corporate, limited liability company, partnership or trade names previously registered with the Secretary of State's Office. Other rules do apply. A thorough reading of the laws pertaining to corporate, limited liability company and partnership names is required, or you may consult the attorney of your choice.
- 8. Filing a Reservation of Corporate/Limited Liability Company/L3C/Partnership Name does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



RESERVATION OF CORPORATE/LIMITED LIABILITY COMPANY/ L3C/PARTNERSHIP NAME

(R.S. 12:1-402A, 12:204, 12:303, 12:1307, 12:1344)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State, State of Louisia	na is requested to reserve the following name for u	se as a
corporate/limited liability company/L3C/	partnership name:	
Said name is requested to be reserved	on behalf of	
for a period of 120 days from the date o	f your receipt of this application.	
	Name	
	Address	
	City/State/Zip	
	Area code/phone number	
	Submitted by:	
		ate

If the requested name is not available, please return this application and the filing fee to the above.

- 1. Names can be reserved for 120 days by filing an application for reservation and the requisite \$25 filing fee with the secretary of state.
- 2. Name availability can be preliminarily checked by calling the Secretary of State's Office; however, telephone name searches are preliminary checks only and should not be relied upon.
- 3. Corporate names (for business corporations) must end with or include the words "Corporation," "Incorporated" or "Limited," or the abbreviation of any of these words, or may instead contain the word "Company" or the abbreviation "Co." if not immediately preceded by the word "and" or the symbol "&."
- 4. Limited liability company names should contain the words "Limited Liability Company," or the abbreviation "L.L.C.," or "L.C." No limited liability company shall include in its name any words which deceptively or falsely suggest a charitable or nonprofit nature.
- 5. L3C names shall contain the words "Limited Liability Company," or the abbreviation "L3C" or the abbreviation "I3c."
- 6. Corporate and limited liability company names shall not imply that the company is an administrative agency of any parish or of this state or of the United States.
- 7. Subject to limited exceptions, a corporate, limited liability company, L3C or partnership name must be distinguishable from other corporate, limited liability company, partnership or trade names previously registered with the Secretary of State's Office. Other rules do apply. A thorough reading of the laws pertaining to corporate, limited liability company and partnership names is required, or you may consult the attorney of your choice.
- 8. Filing a Reservation of Corporate/Limited Liability Company/L3C/Partnership Name does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry



RESERVATION TRANSFER

R.S. 12:1-402(B)

Return to: Commercial Division

A CONTINUE STATE OF THE PARTY OF	Enclose \$25 filing fee M remittance payable Secretary of State Do Not Send Cash	Take to	P.O. F Baton (225)	Sox 94125 Rouge, LA 70804-9125 925-4704 sos.la.gov
Transfer of: () () ()	Corporation Name Limited Liability Company Name Partnership Name	() ()	Trade Mark	(Class:) (Class:)
I,	(Transferor/original owner)			er of reservation of
	(reserved	name/trade mark/service mark)		
to:		(Transferee's Name)		
		(Transferee's Address)		
		(City, State, & Zip Code)		
on behalf of				
	(New Name)			
for the remainder of	the reservation period.			
				Transferor's Signature
				Date
SS402 Rev.05/25				

- 1. Reservations that are filed for corporations, limited liability companies, partnerships, trade names, trade marks, and service marks can be transferred from one owner to another owner by filing the Reservation Transfer.
- 2. Once the Reservation Transfer is filed, the transferee (new owner) takes possession of the reservation for the remainder of the reservation period.
- 3. When the reservation period expires, a new reservation may be filed by filing an Application for Reservation along with the requisite \$25 filing fee with the secretary of state.
- 4. Filing a reservation or the transferring of an existing reservation does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry



RESERVATION TRANSFER

R.S. 12:1-402(B)

Return to: Commercial Division

A CONTINUE STATE OF THE PARTY OF	Enclose \$25 filing fee M remittance payable Secretary of State Do Not Send Cash	Take to	P.O. F Baton (225)	Sox 94125 Rouge, LA 70804-9125 925-4704 sos.la.gov
Transfer of: () () ()	Corporation Name Limited Liability Company Name Partnership Name	() ()	Trade Mark	(Class:) (Class:)
I,	(Transferor/original owner)			er of reservation of
	(reserved	name/trade mark/service mark)		
to:		(Transferee's Name)		
		(Transferee's Address)		
		(City, State, & Zip Code)		
on behalf of				
	(New Name)			
for the remainder of	the reservation period.			
				Transferor's Signature
				Date
SS402 Rev.05/25				

- 1. Reservations that are filed for corporations, limited liability companies, partnerships, trade names, trade marks, and service marks can be transferred from one owner to another owner by filing the Reservation Transfer.
- 2. Once the Reservation Transfer is filed, the transferee (new owner) takes possession of the reservation for the remainder of the reservation period.
- 3. When the reservation period expires, a new reservation may be filed by filing an Application for Reservation along with the requisite \$25 filing fee with the secretary of state.
- 4. Filing a reservation or the transferring of an existing reservation does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

SIMPLIFIED ARTICLES OF TERMINATION

R.S. 12:1-1441(C)



SS1441 Rev. 01/24

Domestic Business Corporation
Enclose \$75 filing fee
Make remittance payable to Secretary of State
Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

S	TATE	E OF	
P	ARIS	H/COUNTY OF	
		me, the undersigned Notary Public in and for the gned who, after being duly sworn, did depose and	parish/county herein above shown, personally came and appeared the say that:
_			Corporation Name
(Check	One)	
()	Has not issued shares, and	
	1. 2. 3.	No debt of the corporation remains unpaid; The corporation owns no immovable property; The termination was authorized by a majority of	the directors.
		OR	
()	Is not doing business, and	
	1. 2. 3. 4.	No debt of the corporation remains unpaid; The corporation owns no immovable property; The net assets of the corporation remaining after The termination was authorized by unanimous v	winding up have been distributed to the shareholders; written consent of the shareholders.
			Signed by the Chairman of the Board, the President, or another of its officers
S	worn t	to and subscribed before me, the undersigned Not	ary Public, on this date:
		Notary Signatur	e, Printed Name, and Notary/Bar Roll Number

- 1. File this form, along with the appropriate filing fee with the Secretary of State's Office.
- 2. You will receive a Certificate of Termination, of which should be kept within the company's records.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

SIMPLIFIED ARTICLES OF TERMINATION

R.S. 12:1-1441(C)



SS1441 Rev. 01/24

Domestic Business Corporation
Enclose \$75 filing fee
Make remittance payable to Secretary of State
Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

S	TATE	E OF	
P	ARIS	H/COUNTY OF	
		me, the undersigned Notary Public in and for the gned who, after being duly sworn, did depose and	parish/county herein above shown, personally came and appeared the say that:
_			Corporation Name
(Check	One)	
()	Has not issued shares, and	
	1. 2. 3.	No debt of the corporation remains unpaid; The corporation owns no immovable property; The termination was authorized by a majority of	the directors.
		OR	
()	Is not doing business, and	
	1. 2. 3. 4.	No debt of the corporation remains unpaid; The corporation owns no immovable property; The net assets of the corporation remaining after The termination was authorized by unanimous v	winding up have been distributed to the shareholders; written consent of the shareholders.
			Signed by the Chairman of the Board, the President, or another of its officers
S	worn t	to and subscribed before me, the undersigned Not	ary Public, on this date:
		Notary Signatur	e, Printed Name, and Notary/Bar Roll Number

- 1. File this form, along with the appropriate filing fee with the Secretary of State's Office.
- 2. You will receive a Certificate of Termination, of which should be kept within the company's records.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



AFFIDAVIT TO DISSOLVE CORPORATION

(R.S. 12:250.1)

Domestic Non Profit Corporation
Enclose \$75 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division
P.O. Box 94125
Baton Rouge, LA 70804-9125
(225) 925-4704
www.sos.la.gov

STATE OF _	
PARISH/COL	JNTY OF
	the undersigned Notary Public in and for the parish/county herein above shown, personally came the undersigned who, after being duly sworn, did depose and say that:
	Corporation Name
	ng business and owes no debts is dissolved by filing this affidavit with the Secretary of by the shareholder(s), or incorporator(s) attesting to such facts.
The undersign	ned further declared that they are: (check one)
()	The shareholders of the above named corporation.
()	The incorporators of the above named corporation and no shares have been issued.
	Incorporator(s) or Shareholder(s) Signature(s)
•	
Sworn to and	subscribed before me, the undersigned Notary Public, on this date:
	Notary Signature, Printed name and Notary/Bar Roll #

SS339 Rev. 01/25 (See instructions on back)

- 1. File this form, along with the appropriate filing fee with the Secretary of State's office.
- 2. You will receive a Certificate of Dissolution, a copy of which should be filed with the clerk of court where the corporation maintains its registered office. If the corporation's registered office is located in Orleans Parish, a Certificate of Dissolution must be filed with the recorder of mortgages.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



AFFIDAVIT TO DISSOLVE CORPORATION

(R.S. 12:250.1)

Domestic Non Profit Corporation
Enclose \$75 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division
P.O. Box 94125
Baton Rouge, LA 70804-9125
(225) 925-4704
www.sos.la.gov

STATE OF _	
PARISH/COL	JNTY OF
	the undersigned Notary Public in and for the parish/county herein above shown, personally came the undersigned who, after being duly sworn, did depose and say that:
	Corporation Name
	ng business and owes no debts is dissolved by filing this affidavit with the Secretary of by the shareholder(s), or incorporator(s) attesting to such facts.
The undersign	ned further declared that they are: (check one)
()	The shareholders of the above named corporation.
()	The incorporators of the above named corporation and no shares have been issued.
	Incorporator(s) or Shareholder(s) Signature(s)
•	
Sworn to and	subscribed before me, the undersigned Notary Public, on this date:
	Notary Signature, Printed name and Notary/Bar Roll #

SS339 Rev. 01/25 (See instructions on back)

- 1. File this form, along with the appropriate filing fee with the Secretary of State's office.
- 2. You will receive a Certificate of Dissolution, a copy of which should be filed with the clerk of court where the corporation maintains its registered office. If the corporation's registered office is located in Orleans Parish, a Certificate of Dissolution must be filed with the recorder of mortgages.

STATE OF LOUISIANA SECRETARY OF STATE



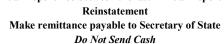
Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Domestic Business Corporation Enclose \$75 Reinstatement Filing Fee, Plus \$30 for each Annual Report Fee between the last Annual Report and





R.S. 12:1-1444(E)

Return to: Commercial Division P.O. Box 94125

> Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

STATE OF
PARISH/COUNTY OF
1. The name of the corporation to be reinstated is:
2. The reinstatement was approved by (check one):
a. () a director or officer in accordance with R.S. 12:1-1444(B). (For corporations administratively terminated)
b. () unanimous consent of the shareholders. The directors and officers listed in the annual report or written statement accompanying these Articles of Reinstatement were elected in accordance with R.S. 12:1-1444(C). (For corporations voluntarily terminated)
3. The corporation is reinstated, effective retroactively as if it had never been terminated.
To be signed by an officer or director authorized to approve the reinstatement
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary Signature, Printed Name, and Notary/Bar Roll Number
, , , , , , , , , , , , , , , , , , ,
SS1444 Rev. 01/24

- 1. File the Articles of Reinstatement, along with the most current annual report, with the Secretary of State's office. If the corporation is reinstating in accordance with R.S. 12:1-1444(C) [option b on the Articles of Reinstatement form], and the annual report is not yet due, a separate written statement listing the names and addresses of the elected directors and officers must accompany this form. The filing fee shall be \$75 for the reinstatement, plus \$30 for the most current annual report, plus \$30 for each annual report not filed between the last annual report and reinstatement (the prior annual report forms do not have to be submitted).
- 2. The corporation may be reinstated up to five (5) years after the effective date of the termination. If the five year window has expired, the corporation cannot be reinstated.

STATE OF LOUISIANA SECRETARY OF STATE



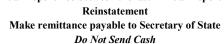
Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Domestic Business Corporation Enclose \$75 Reinstatement Filing Fee, Plus \$30 for each Annual Report Fee between the last Annual Report and





R.S. 12:1-1444(E)

Return to: Commercial Division P.O. Box 94125

> Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

STATE OF
PARISH/COUNTY OF
1. The name of the corporation to be reinstated is:
2. The reinstatement was approved by (check one):
a. () a director or officer in accordance with R.S. 12:1-1444(B). (For corporations administratively terminated)
b. () unanimous consent of the shareholders. The directors and officers listed in the annual report or written statement accompanying these Articles of Reinstatement were elected in accordance with R.S. 12:1-1444(C). (For corporations voluntarily terminated)
3. The corporation is reinstated, effective retroactively as if it had never been terminated.
To be signed by an officer or director authorized to approve the reinstatement
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary Signature, Printed Name, and Notary/Bar Roll Number
, , , , , , , , , , , , , , , , , , ,
SS1444 Rev. 01/24

- 1. File the Articles of Reinstatement, along with the most current annual report, with the Secretary of State's office. If the corporation is reinstating in accordance with R.S. 12:1-1444(C) [option b on the Articles of Reinstatement form], and the annual report is not yet due, a separate written statement listing the names and addresses of the elected directors and officers must accompany this form. The filing fee shall be \$75 for the reinstatement, plus \$30 for the most current annual report, plus \$30 for each annual report not filed between the last annual report and reinstatement (the prior annual report forms do not have to be submitted).
- 2. The corporation may be reinstated up to five (5) years after the effective date of the termination. If the five year window has expired, the corporation cannot be reinstated.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



ARTICLES OF ORGANIZATION

(R.S. 12:1301)

Domestic Limited Liability Company Enclose \$100 filing fee Make remittance payable to Secretary of State Do not send cash

Return to: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
(225) 925-4704
www.sos.la.gov

STATE OF	
PARISH/COUNTY OF	
1. The name of this limited liability	company is :
2. This company is formed for the	e purpose of: (check one)
() Engaging in any lawful acti	vity for which limited liability companies may be formed.
() (use 1	or limiting activity)
3. The duration of this limited liab	ility company is : (may be perpetual)
4. This limited liability company is	: (check one) ()Member-managed ()Manager-managed
5. Other Provisions:	
Signa	atures:
On thisday of	, 20, before me, personally appeared
	, to me known to be the person described in and who
executed the foregoing instrument, ar	nd acknowledged that he/she executed it as his/her free act and deed. R PRINTED WITH NOTARY #
	Notony Cianoturo
	Notary Signature

NOTE: This form contains only the minimum provisions required by law to be set forth in Articles of Organization. Additional provisions may be advisable or necessary, depending on the specific needs of each company. Consideration should be given to the advantages and disadvantages of forming a limited liability company, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney and tax and other business advice from an accountant.

- 1. File the Articles of Organization, and the domestic limited liability company Initial Report (Form 973) which contains an agent affidavit and the requisite \$100 filing fee with the Secretary of State's Office.
- 2. The Articles of Organization and the Initial Report may be delivered to the Secretary of State's Office in advance, for filing as of any specified date (and any given time on such date) within 30 days after the date of delivery. Request should be made in writing and must be submitted along with the Articles of Organization and the Initial Report.
- 3. The Articles of Organization cannot be accepted for filing unless an Initial Report (Form 973) is also filed. Upon filing with our office, you will receive a certificate of organization. Certified copies are available at a cost of \$15 each. Additional certificates are \$20 each.
- 4. If the Articles of Organization are filed within five working days (exclusive of legal holidays) after acknowledgment, the existence shall begin asof the time of such acknowledgment.



LIMITED LIABILITY COMPANY INITIAL REPORT (R.S. 12:1305 (E))

1.	The name of this limited liability company is:
2.	The location and municipal address, not a post office box only, of this limited liability company's registered office:
3.	The full name and municipal address, not a post office box only, of each of this limited liability company's registered agent(s) is/are:
4.	The names and municipal addresses, not a post office box only, of the first managers, or the members:
	To be signed by each person who signed the articles of organization:
	AGENT'S AFFIDAVIT AND ACKNOWLEDGEMENT OF ACCEPTANCE
	ereby acknowledge and accept the appointment of registered agent for and on behalf of the above
na	med limited liability company. Registered agent(s) signature(s):
	vorn to and subscribed before me, the undersigned Notary Public, on this date: OTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #
	Notary Signature

SS973 Rev. 01/25 (see instructions on back)

- 1. An Initial Report must be completed and filed with the Articles of Organization of a Limited Liability Company.
- 2. The name shall contain the words "limited liability company," the abbreviation "L.L.C." or the abbreviation "L.C."
- 3. If managers or members have been selected and the management is vested in managers, at least one manager should be provided, or if management is vested in the members, at least one member should be provided. If no first managers or members have been selected when the Initial Report and Articles of Organization are filed, a Supplemental Report, setting forth their names and addresses must be filed in accordance with R.S. 12:1305 (E)4.
- 4. The Affidavit of Acknowledgement and Acceptance contained on the bottom of this form must be signed by each registered agent before a notary public.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



ARTICLES OF ORGANIZATION

(R.S. 12:1301)

Domestic Limited Liability Company
Enclose \$100 filing fee
Make remittance payable to
Secretary of State
Do not send cash

Return to: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
(225) 925-4704
www.sos.la.gov

STATE OF	-
PARISH/COUNTY OF	
The name of this limited liability com	pany is :
2. This company is formed for the purp	ose of: (check one)
() Engaging in any lawful activity for	or which limited liability companies may be formed.
() (use for limit	ing activity)
3. The duration of this limited liability co	
4. This limited liability company is: (che	ck one) ()Member-managed ()Manager-managed
5. Other Provisions:	
Signatures	
On thisday of	, 20, before me, personally appeared
	, to me known to be the person described in and who
executed the foregoing instrument, and ack	nowledged that he/she executed it as his/her free act and deed
NOTARY NAME MUST BE TYPED OR PRI	NTED WITH NOTARY #
Notary	/ Signature

NOTE: This form contains only the minimum provisions required by law to be set forth in Articles of Organization. Additional provisions may be advisable or necessary, depending on the specific needs of each company. Consideration should be given to the advantages and disadvantages of forming a limited liability company, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney and tax and other business advice from an accountant.

- 1. File the Articles of Organization, and the domestic limited liability company Initial Report (Form 973) which contains an agent affidavit and the requisite \$100 filing fee with the Secretary of State's Office.
- 2. The Articles of Organization and the Initial Report may be delivered to the Secretary of State's Office in advance, for filing as of any specified date (and any given time on such date) within 30 days after the date of delivery. Request should be made in writing and must be submitted along with the Articles of Organization and the Initial Report.
- 3. The Articles of Organization cannot be accepted for filing unless an Initial Report (Form 973) is also filed. Upon filing with our office, you will receive a certificate of organization. Certified copies are available at a cost of \$15 each. Additional certificates are \$20 each.
- 4. If the Articles of Organization are filed within five working days (exclusive of legal holidays) after acknowledgment, the existence shall begin asof the time of such acknowledgment.



LIMITED LIABILITY COMPANY INITIAL REPORT (R.S. 12:1305 (E))

1.	The name of this limited liability company is:
2.	The location and municipal address, not a post office box only, of this limited liability company's registered office:
3.	The full name and municipal address, not a post office box only, of each of this limited liability company's registered agent(s) is/are:
4.	The names and municipal addresses, not a post office box only, of the first managers, or the members:
	To be signed by each person who signed the articles of organization:
	AGENT'S AFFIDAVIT AND ACKNOWLEDGEMENT OF ACCEPTANCE
	ereby acknowledge and accept the appointment of registered agent for and on behalf of the above
na	med limited liability company. Registered agent(s) signature(s):
	vorn to and subscribed before me, the undersigned Notary Public, on this date: OTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #
	Notary Signature

SS973 Rev. 01/25 (see instructions on back)

- 1. An Initial Report must be completed and filed with the Articles of Organization of a Limited Liability Company.
- 2. The name shall contain the words "limited liability company," the abbreviation "L.L.C." or the abbreviation "L.C."
- 3. If managers or members have been selected and the management is vested in managers, at least one manager should be provided, or if management is vested in the members, at least one member should be provided. If no first managers or members have been selected when the Initial Report and Articles of Organization are filed, a Supplemental Report, setting forth their names and addresses must be filed in accordance with R.S. 12:1305 (E)4.
- 4. The Affidavit of Acknowledgement and Acceptance contained on the bottom of this form must be signed by each registered agent before a notary public.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



ARTICLES OF ORGANIZATION

(R.S. 12:1301)

Domestic Low-profit Limited Liability Company
Enclose \$100 filing fee
Make remittance payable to
Secretary of State
Do not send cash

Return To: Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

STATE OF	
PARISH/COUNTY OF	
. The name of this limited liability company is	S:
This company is formed for a purpose that	satisfies the requirements of Act 417 of 2010.
The primary purpose of the low-profit limite	d liability company is as follows:
6. The duration of this limited liability company	y is : (may be perpetual)
. This low-profit limited liability company is: (check one) ()Member-managed ()Manager-managed
. Other provisions:	
Signatures:	
On thisday of,	20, before me, personally appeared
	to me known to be the person described in and who
	lged that he/she executed it as his/her free act and deed
Notary Signa	

NOTE:This form contains only the minimum provisions required by law to be set forth in Articles of Organization. Additional provisions may be advisable or necessary, depending on the specific needs of each company. Consideration should be given to the advantages and disadvantages of forming a limited liability company, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney and tax and other business advice from an accountant.

- 1. File the Articles of Organization, and the domestic limited liability company Initial Report (Form 973) which contains an agent affidavit and the requisite \$100 fee with the Secretary of State's office.
- 2. The Articles of Organization and the Initial Report may be delivered to the Secretary of State's Office in advance, for filing as of any specified date (and any given time on such date), within 30 days after the date of delivery. Request should be made in writing and must be submitted along with the Articles of Organization and the Initial Report.
- 3. The Articles of Organization cannot be accepted for filing unless an Initial Report (Form 973) is also filed. Upon filing with our office, you will receive a certificate of organization. Certified copies are available at a cost of \$15 each. Additional certificates are \$20 each.
- 4. If the Articles of Organization are filed within five working days (exclusive of legal holidays) after acknowledgment, the existence shall begin as of the time of such acknowledgment.



LIMITED LIABILITY COMPANY INITIAL REPORT (R.S. 12:1305 (E))

1.	The name of this limited liability company is:
2.	The location and municipal address, not a post office box only, of this limited liability company's registered office:
3.	The full name and municipal address, not a post office box only, of each of this limited liability company's registered agent(s) is/are:
4.	The names and municipal addresses, not a post office box only, of the first managers, or the members:
	To be signed by each person who signed the articles of organization:
	AGENT'S AFFIDAVIT AND ACKNOWLEDGEMENT OF ACCEPTANCE
	ereby acknowledge and accept the appointment of registered agent for and on behalf of the above
па	med limited liability company. Registered agent(s) signature(s):
	vorn to and subscribed before me, the undersigned Notary Public, on this date: OTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #
	Notary Signature

SS973 Rev. 01/24 (see instructions on back)

- 1. An Initial Report must be completed and filed with the Articles of Organization of a Limited Liability Company.
- 2. The name shall contain the words "low-profit limited liability company", the abbreviation "L3C", or the abbreviation "I3c".
- 3. If managers or members have been selected and the management is vested in managers, at least one manager should be provided, or if management is vested in the members, at least one member should be provided. If no first managers or members have been selected when the Initial Report and Articles of Organization are filed, a Supplemental Report, setting forth their names and addresses must be filed in accordance with R.S. 12:1305 (E)4.
- 4. The Affidavit of Acknowledgement and Acceptance contained on the bottom of this form must be signed by each registered agent before a notary public.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



ARTICLES OF ORGANIZATION

(R.S. 12:1301)

Domestic Low-profit Limited Liability Company
Enclose \$100 filing fee
Make remittance payable to
Secretary of State
Do not send cash

Return To: Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

STATE OF	
PARISH/COUNTY OF	
. The name of this limited li	ability company is:
• •	or a purpose that satisfies the requirements of Act 417 of 2010. le low-profit limited liability company is as follows:
3. The duration of this limited	d liability company is : (may be perpetual)
I. This low-profit limited liabi	lity company is: (check one) ()Member-managed ()Manager-managed
5. Other provisions:	
	Signatures:
	·
	·
On thisday of	, 20, before me, personally appeared
	, to me known to be the person described in and who
	ent, and acknowledged that he/she executed it as his/her free act and deed PED OR PRINTED WITH NOTARY #
	Notary Signature
	. •

NOTE:This form contains only the minimum provisions required by law to be set forth in Articles of Organization. Additional provisions may be advisable or necessary, depending on the specific needs of each company. Consideration should be given to the advantages and disadvantages of forming a limited liability company, and the legal and tax consequences. You are strongly advised to seek legal advice from an attorney and tax and other business advice from an accountant.

- 1. File the Articles of Organization, and the domestic limited liability company Initial Report (Form 973) which contains an agent affidavit and the requisite \$100 fee with the Secretary of State's office.
- 2. The Articles of Organization and the Initial Report may be delivered to the Secretary of State's Office in advance, for filing as of any specified date (and any given time on such date), within 30 days after the date of delivery. Request should be made in writing and must be submitted along with the Articles of Organization and the Initial Report.
- 3. The Articles of Organization cannot be accepted for filing unless an Initial Report (Form 973) is also filed. Upon filing with our office, you will receive a certificate of organization. Certified copies are available at a cost of \$15 each. Additional certificates are \$20 each.
- 4. If the Articles of Organization are filed within five working days (exclusive of legal holidays) after acknowledgment, the existence shall begin as of the time of such acknowledgment.



LIMITED LIABILITY COMPANY INITIAL REPORT (R.S. 12:1305 (E))

1.	The name of this limited liability company is:
2.	The location and municipal address, not a post office box only, of this limited liability company's registered office:
3.	The full name and municipal address, not a post office box only, of each of this limited liability company's registered agent(s) is/are:
4.	The names and municipal addresses, not a post office box only, of the first managers, or the members:
	To be signed by each person who signed the articles of organization:
	AGENT'S AFFIDAVIT AND ACKNOWLEDGEMENT OF ACCEPTANCE
	ereby acknowledge and accept the appointment of registered agent for and on behalf of the above
па	med limited liability company. Registered agent(s) signature(s):
	vorn to and subscribed before me, the undersigned Notary Public, on this date: OTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #
	Notary Signature

SS973 Rev. 01/24 (see instructions on back)

- 1. An Initial Report must be completed and filed with the Articles of Organization of a Limited Liability Company.
- 2. The name shall contain the words "low-profit limited liability company", the abbreviation "L3C", or the abbreviation "I3c".
- 3. If managers or members have been selected and the management is vested in managers, at least one manager should be provided, or if management is vested in the members, at least one member should be provided. If no first managers or members have been selected when the Initial Report and Articles of Organization are filed, a Supplemental Report, setting forth their names and addresses must be filed in accordance with R.S. 12:1305 (E)4.
- 4. The Affidavit of Acknowledgement and Acceptance contained on the bottom of this form must be signed by each registered agent before a notary public.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



NOTICE OF CHANGE OF REGISTERED OFFICE AND/OR CHANGE OF REGISTERED AGENT

(R.S. 12:1308)

Enclose \$25 Filing Fee

Domestic Limited Liability Company
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

CHANGE OF	LOCATION OF REGISTERED OFFICE	
Notice is hereby given that the above rits registered office. The new registere	named limited liability company has authorized a changed office is located at:	ge in the location o
	To be signed by a member or manager	Date
CHAN	NGE OF REGISTERED AGENT(S)	
	named limited liability company has authorized the chas) of the new registered agent(s) is/are as follows:	nge of its registere
	To be signed by a manager or member	Date
AGENT AFFIDAVIT A	AND ACKNOWLEDGEMENT OF ACCEPTANCE	
I hereby acknowledge and accept the a limited liability company.	appointment of registered agent(s) for and on behalf of	the above named
	Registered Agent(s)	
Sworn to and subscribed before me, the NOTARY NAME MUST BE TYPED O	ne undersigned Notary Public, on this date: R PRINTED WITH NOTARY #	
	Notary Signature	

SS983 Rev. 01/24 (See instructions on back)

- 1. This form is to be used when an existing domestic limited liability company changes the location of its registered officeor changes its registered agent(s), or both.
- 2. The Change of Location of Registered Office or Change of Registered Agent(s) must be signed by a manager, if management of the limited liability company is vested in one or more managers, or by at least one member, if management of the limited liability company is reserved to the members.
- 3. The new registered agent(s) must sign the acknowledgement and acceptance of their appointment before a notary public.
- 4. A registered agent may change his address in this state by signing a statement which includes the following:
 - a. The name of the limited liability company for which the change is effective.
 - b. The new address of the registered agent.

If the old and new addresses of the registered agent are the same as the old and new addresses of the registered office, the statement may include a change of address of the registered office if:

- a. The registered agent notifies the company in writing.
- b. The statement recites that the registered agent has done so.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	t address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



NOTICE OF CHANGE OF REGISTERED OFFICE AND/OR CHANGE OF REGISTERED AGENT

(R.S. 12:1308)

Enclose \$25 Filing Fee

Domestic Limited Liability Company
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

CHANGE OF	LOCATION OF REGISTERED OFFICE	
Notice is hereby given that the above rits registered office. The new registere	named limited liability company has authorized a changed office is located at:	ge in the location o
	To be signed by a member or manager	Date
CHAN	NGE OF REGISTERED AGENT(S)	
	named limited liability company has authorized the chass) of the new registered agent(s) is/are as follows:	nge of its registere
	To be signed by a manager or member	Date
AGENT AFFIDAVIT A	AND ACKNOWLEDGEMENT OF ACCEPTANCE	
I hereby acknowledge and accept the a limited liability company.	appointment of registered agent(s) for and on behalf of	the above named
	Registered Agent(s)	
Sworn to and subscribed before me, the NOTARY NAME MUST BE TYPED O	ne undersigned Notary Public, on this date: R PRINTED WITH NOTARY #	
	Notary Signature	

SS983 Rev. 01/24 (See instructions on back)

- 1. This form is to be used when an existing domestic limited liability company changes the location of its registered officeor changes its registered agent(s), or both.
- 2. The Change of Location of Registered Office or Change of Registered Agent(s) must be signed by a manager, if management of the limited liability company is vested in one or more managers, or by at least one member, if management of the limited liability company is reserved to the members.
- 3. The new registered agent(s) must sign the acknowledgement and acceptance of their appointment before a notary public.
- 4. A registered agent may change his address in this state by signing a statement which includes the following:
 - a. The name of the limited liability company for which the change is effective.
 - b. The new address of the registered agent.

If the old and new addresses of the registered agent are the same as the old and new addresses of the registered office, the statement may include a change of address of the registered office if:

- a. The registered agent notifies the company in writing.
- b. The statement recites that the registered agent has done so.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	t address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



NOTICE OF CHANGE OF MEMBERS AND/OR MANAGERS OF A LIMITED LIABILITY COMPANY

Enclose \$25 filing fee Domestic Limited Liability Company Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

REMOVAL OF I	MEMBERS AND/OR MANAGERS	
tice is hereby given that the above named Iy the titles indicated will be removed.	I limited liability company authorized the removal of the	following:
Name and Title	Name and Title	_
Name and Title	Name and Title	_
Name and Title	Name and Title	_
	To be signed by a member or manager MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the d.	Da ne
ce is hereby given that the above named I	MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the	
ce is hereby given that the above named I wing: <i>Only the titles indicated will be adde</i>	MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the	
ce is hereby given that the above named I wing: <i>Only the titles indicated will be adde</i>	MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the	
ce is hereby given that the above named I wing: <i>Only the titles indicated will be adde</i> Name and Title	F MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the d. Municipal Address	
ce is hereby given that the above named I wing: Only the titles indicated will be adde Name and Title Name and Title	F MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the d. Municipal Address Municipal Address	

SS983A Rev. 01/24 (See instructions on back)

- 1. This form is to be used when an existing domestic limited liability company changes the Member(s) and/or Manager(s).
- 2. The Change of Member(s) and/or Manager(s) must be signed by a manager, if management of the limited liability company is vested in one or more managers, or by at least one member, if management of the limited liability company is reserved to the members.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	t address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



NOTICE OF CHANGE OF MEMBERS AND/OR MANAGERS OF A LIMITED LIABILITY COMPANY

Enclose \$25 filing fee Domestic Limited Liability Company Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

REMOVAL OF I	MEMBERS AND/OR MANAGERS	
tice is hereby given that the above named Iy the titles indicated will be removed.	I limited liability company authorized the removal of the	following:
Name and Title	Name and Title	_
Name and Title	Name and Title	_
Name and Title	Name and Title	_
	To be signed by a member or manager MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the d.	Da ne
ce is hereby given that the above named I	MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the	
ce is hereby given that the above named I wing: <i>Only the titles indicated will be adde</i>	MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the	
ce is hereby given that the above named I wing: <i>Only the titles indicated will be adde</i>	MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the	
ce is hereby given that the above named I wing: <i>Only the titles indicated will be adde</i> Name and Title	F MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the d. Municipal Address	
ce is hereby given that the above named I wing: Only the titles indicated will be adde Name and Title Name and Title	F MEMBERS AND/OR MANAGERS imited liability company has authorized the addition of the d. Municipal Address Municipal Address	

SS983A Rev. 01/24 (See instructions on back)

- 1. This form is to be used when an existing domestic limited liability company changes the Member(s) and/or Manager(s).
- 2. The Change of Member(s) and/or Manager(s) must be signed by a manager, if management of the limited liability company is vested in one or more managers, or by at least one member, if management of the limited liability company is reserved to the members.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	t address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



RESERVATION OF CORPORATE/LIMITED LIABILITY COMPANY/ L3C/PARTNERSHIP NAME

(R.S. 12:1-402A, 12:204, 12:303, 12:1307, 12:1344)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State, State of Louisia	ana is requested to reserve the following name for use as	а
corporate/limited liability company/L3C/	/partnership name:	
Said name is requested to be reserved	on behalf of	
for a period of 120 days from the date of	of your receipt of this application.	
	Name	
	Address	
	Address	
	City/State/Zip	
	Area code/phone number	
	Submitted by:	
	Date	

SS398 Rev. 01/24 (see instructions on back)

If the requested name is not available, please return this application and the filing fee to the above.

- 1. Names can be reserved for 120 days by filing an application for reservation and the requisite \$25 filing fee with the secretary of state.
- 2. Name availability can be preliminarily checked by calling the Secretary of State's Office; however, telephone name searches are preliminary checks only and should not be relied upon.
- 3. Corporate names (for business corporations) must end with or include the words "Corporation," "Incorporated" or "Limited," or the abbreviation of any of these words, or may instead contain the word "Company" or the abbreviation "Co." if not immediately preceded by the word "and" or the symbol "&."
- 4. Limited liability company names should contain the words "Limited Liability Company," or the abbreviation "L.L.C.," or "L.C." No limited liability company shall include in its name any words which deceptively or falsely suggest a charitable or nonprofit nature.
- 5. L3C names shall contain the words "Limited Liability Company," or the abbreviation "L3C" or the abbreviation "I3c."
- 6. Corporate and limited liability company names shall not imply that the company is an administrative agency of any parish or of this state or of the United States.
- 7. Subject to limited exceptions, a corporate, limited liability company, L3C or partnership name must be distinguishable from other corporate, limited liability company, partnership or trade names previously registered with the Secretary of State's Office. Other rules do apply. A thorough reading of the laws pertaining to corporate, limited liability company and partnership names is required, or you may consult the attorney of your choice.
- 8. Filing a Reservation of Corporate/Limited Liability Company/L3C/Partnership Name does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	t address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



RESERVATION OF CORPORATE/LIMITED LIABILITY COMPANY/ L3C/PARTNERSHIP NAME

(R.S. 12:1-402A, 12:204, 12:303, 12:1307, 12:1344)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State, State of Louisia	ana is requested to reserve the following name for use as	а
corporate/limited liability company/L3C/	/partnership name:	
Said name is requested to be reserved	on behalf of	
for a period of 120 days from the date of	of your receipt of this application.	
	Name	
	Address	
	Address	
	City/State/Zip	
	Area code/phone number	
	Submitted by:	
	Date	

SS398 Rev. 01/24 (see instructions on back)

If the requested name is not available, please return this application and the filing fee to the above.

- 1. Names can be reserved for 120 days by filing an application for reservation and the requisite \$25 filing fee with the secretary of state.
- 2. Name availability can be preliminarily checked by calling the Secretary of State's Office; however, telephone name searches are preliminary checks only and should not be relied upon.
- 3. Corporate names (for business corporations) must end with or include the words "Corporation," "Incorporated" or "Limited," or the abbreviation of any of these words, or may instead contain the word "Company" or the abbreviation "Co." if not immediately preceded by the word "and" or the symbol "&."
- 4. Limited liability company names should contain the words "Limited Liability Company," or the abbreviation "L.L.C.," or "L.C." No limited liability company shall include in its name any words which deceptively or falsely suggest a charitable or nonprofit nature.
- 5. L3C names shall contain the words "Limited Liability Company," or the abbreviation "L3C" or the abbreviation "I3c."
- 6. Corporate and limited liability company names shall not imply that the company is an administrative agency of any parish or of this state or of the United States.
- 7. Subject to limited exceptions, a corporate, limited liability company, L3C or partnership name must be distinguishable from other corporate, limited liability company, partnership or trade names previously registered with the Secretary of State's Office. Other rules do apply. A thorough reading of the laws pertaining to corporate, limited liability company and partnership names is required, or you may consult the attorney of your choice.
- 8. Filing a Reservation of Corporate/Limited Liability Company/L3C/Partnership Name does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry



RESERVATION TRANSFER

R.S. 12:1-402(B)

Return to: Commercial Division

A CONTINUE STATE OF THE PARTY OF	Enclose \$25 filing fee M remittance payable Secretary of State Do Not Send Cash	Take to	P.O. E Baton (225)	Sox 94125 Rouge, LA 70804-9125 925-4704 sos.la.gov
Transfer of: () () ()	Corporation Name Limited Liability Company Name Partnership Name	() ()	Trade Mark	(Class:) (Class:)
I,	(Transferor/original owner)			er of reservation of
	(reserved	name/trade mark/service mark)		
to:		(Transferee's Name)		
		(Transferee's Address)		
		(City, State, & Zip Code)		
on behalf of				
	(New Name)			
for the remainder of	the reservation period.			
				Transferor's Signature
				Date
SS402 Rev.05/25				

INSTRUCTIONS

- 1. Reservations that are filed for corporations, limited liability companies, partnerships, trade names, trade marks, and service marks can be transferred from one owner to another owner by filing the Reservation Transfer.
- 2. Once the Reservation Transfer is filed, the transferee (new owner) takes possession of the reservation for the remainder of the reservation period.
- 3. When the reservation period expires, a new reservation may be filed by filing an Application for Reservation along with the requisite \$25 filing fee with the secretary of state.
- 4. Filing a reservation or the transferring of an existing reservation does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry



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R.S. 12:1-402(B)

Return to: Commercial Division

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Transfer of: () () ()	Corporation Name Limited Liability Company Name Partnership Name	() ()	Trade Mark	(Class:) (Class:)
I,	(Transferor/original owner)			er of reservation of
	(reserved	name/trade mark/service mark)		
to:		(Transferee's Name)		
		(Transferee's Address)		
		(City, State, & Zip Code)		
on behalf of				
	(New Name)			
for the remainder of	the reservation period.			
				Transferor's Signature
				Date
SS402 Rev.05/25				

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- 1. Reservations that are filed for corporations, limited liability companies, partnerships, trade names, trade marks, and service marks can be transferred from one owner to another owner by filing the Reservation Transfer.
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STATE OF LOUISIANA SECRETARY OF STATE



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Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
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Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry Secretary of State



LIMITED LIABILITY COMPANY SUPPLEMENTAL INITIAL REPORT

(R.S. 12:1305)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to:

Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

1. The nam	ne of this company is:
2. The nam	nes and municipal addresses (not a P.O. Box only) of the first managers or members are:
Name	
Address	
LLC:	To be signed by each person who signed the Articles of Organization:
	Date

SS366 Rev. 01/24 (see instructions on back)

INSTRUCTIONS

- If a limited liability company's initial managers or members are not named in the Initial Report, a Supplemental Report must be filed after they are selected. The Supplemental Report shall set forth the name and address of each manager or member
- 2. The Supplemental Report shall be signed by each person who signed the Articles of Organization.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry Secretary of State



LIMITED LIABILITY COMPANY SUPPLEMENTAL INITIAL REPORT

(R.S. 12:1305)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to:

Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

1. The nam	ne of this company is:
2. The nam	nes and municipal addresses (not a P.O. Box only) of the first managers or members are:
Name	
Address	
LLC:	To be signed by each person who signed the Articles of Organization:
	Date

SS366 Rev. 01/24 (see instructions on back)

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STATE OF LOUISIANA SECRETARY OF STATE



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<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry Secretary of State



AFFIDAVIT TO DISSOLVE LIMITED LIABILITY COMPANY

(R.S. 12:1335.1)

Domestic Limited Liability Company | Return to: Commercial Division Enclose \$100 filing fee Make remittance payable to **Secretary of State** Do Not Send Cash

P. O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

STATE OF	
PARISH/COUN	TY OF
	he undersigned Notary Public in and for the parish/county herein above shown, personally ared the undersigned who, after being duly sworn, did depose and say that:
	Limited Liability Company Name
	ng business, owes no debts and owns no immovable property is dissolved by filing this affidavit ary of State, executed by the member(s) or organizer(s) if no membership interests have been g to such facts.
The undersigne	ed further declared that they are: (check one)
()	All of the members of the above named limited liability company.
()	All of the organizers of the above named limited liability company, and no membership interests have been issued.
	Member(s) or Organizer(s) Signature(s)
	ubscribed before me, the undersigned Notary Public, on this date: E MUST BE TYPED OR PRINTED WITH NOTARY #
	 Notary Signature

INSTRUCTIONS

- 1. File this form, along with the appropriate filing fee with the Secretary of State's Office.
- 2. You will receive a Certificate of Dissolution.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry Secretary of State



AFFIDAVIT TO DISSOLVE LIMITED LIABILITY COMPANY

(R.S. 12:1335.1)

Domestic Limited Liability Company | Return to: Commercial Division Enclose \$100 filing fee Make remittance payable to **Secretary of State** Do Not Send Cash

P. O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

STATE OF	
PARISH/COUN	TY OF
	he undersigned Notary Public in and for the parish/county herein above shown, personally ared the undersigned who, after being duly sworn, did depose and say that:
	Limited Liability Company Name
	ng business, owes no debts and owns no immovable property is dissolved by filing this affidavit ary of State, executed by the member(s) or organizer(s) if no membership interests have been g to such facts.
The undersigne	ed further declared that they are: (check one)
()	All of the members of the above named limited liability company.
()	All of the organizers of the above named limited liability company, and no membership interests have been issued.
	Member(s) or Organizer(s) Signature(s)
	ubscribed before me, the undersigned Notary Public, on this date: E MUST BE TYPED OR PRINTED WITH NOTARY #
	 Notary Signature

INSTRUCTIONS

- 1. File this form, along with the appropriate filing fee with the Secretary of State's Office.
- 2. You will receive a Certificate of Dissolution.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809

Nancy Landry Secretary of State



LOUISIANA PARTNERSHIP REGISTRATION FORM

(R.S. 9:3401)

Enclose \$100.00 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

Phone (225) 925-4704 Web Site: www.sos.la.gov

CHECK ONE: () Original Filing () Amendment	
Current Partnership Name:	
Previous Partnership Name:	
Louisiana municipal address of principal place of business:	
Effective date of contract:Telephone ()	
Name and municipal address of each partner: (Attach addendum if needed)	
Name	
Address	
Name	
Address	
 Name	
Address	
	Date

SS342 Rev. 01/24 (see instructions on back)

INSTRUCTIONS AND LOUISIANA PARTNERSHIP REGISTRY LAW

- 1. Attach a multiple original signed by all partners or a notarized copy of the partnership contract or amendment.
- 2. A copy of the contract of partnership certified by the secretary of state, shall be filed with recorder of mortgages of the parish in which the partnership maintains its principal place of business.
- 3. This registration does not serve as a trade name registration.

3402. Filing

The contract of partnership or a multiple original thereof, duly executed by the partners, or a certified copy thereof, or statements submitted by foreign partnerships in accordance with R.S. 9:3421, et seq. shall be filed for registry with the Secretary of State in accordance with the provisions of this Chapter to affect third persons as provided by Civil Code Articles 2806 and 2841 or when the parties choose to comply with the provisions of this Chapter.

3403. Contract of Partnership: required content

A contract of partnership filed for registry with the secretary of state shall contain the name of the partnership, the municipal address of its principal place of business in this state, and the name and municipal address of each partner, including partners in commendam, if any.

3404. Contract amendment

An amendment to a contract of partnership shall be filed for registry in the same manner as an original contract of partnership. Until filed for registry, such amendment shall not be effective as to third persons. An amendment to a contract of partnership that is not registered with the secretary of state shall be accompanied by an original copy of the contract of partnership or a certified copy, and all previous amendments.

3405. Registration; endorsement; issuance of certificate; effect

When all fees have been paid, the secretary of state shall register the contract of partnership, or multiple original, or a certified copy or the statement of a foreign partnership, in the Central Registry for Contracts of Partnership created for that purpose, endorse on all documents delivered the month, day, year and hour of filing, and shall issue a certificate of registry certifying that the contract of partnership or statement of the partnership is filed and registered. The certificate of registry shall be conclusive evidence of due registration. A contract, statement or amendment that is duly registered is deemed registered as of the time of filing.

3406. Recorder of mortgages; filings

A multiple original of the contract of partnership or a copy certified by the secretary of state and a copy of the certificate of registry shall be filed for registry with the recorder of mortgages of the parish in which the partnership maintains its principal place of business. Failure to file these documents with the recorder of mortgages as provided by this Section shall not affect the title of immovable property as being in the partnership or the status of a partner in commendam or a limited partner.

3407. Delivery in advance of effective date

Prior to its effective date, a contract of partnership or a statement of a foreign partnership may be delivered to the secretary of state for filing and registration on any specified month, day, year and hour on or before the thirtieth day after the day of delivery.

3408. Filing within five days of execution; effect

A contract of partnership or a statement of a foreign partnership filed for registry with the secretary of state within five days of execution exclusive of legal holidays, is deemed filed for registry on the month, day, year and hour of execution.

Section 2. The provisions of the Act shall not divest already vested rights or impair the obligation of contracts in existence on the effective date of this Act.

The provisions of this Act shall apply to all partnerships, whether created prior to, on, or subsequent to the effective date of this Act; provided that the lack of compliance with the provisions of this Act shall not affect the ownership of immovable property owned by the partnership on the effective date of this Act or limitations in existence on the effective date of this Act on the liability of partners in commendam, or limited partners.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

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Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
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documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809

Nancy Landry Secretary of State



LOUISIANA PARTNERSHIP REGISTRATION FORM

(R.S. 9:3401)

Enclose \$100.00 filing fee
Make remittance payable to
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Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

Phone (225) 925-4704 Web Site: www.sos.la.gov

CHECK ONE: () Original Filing () Amendment	
Current Partnership Name:	
Previous Partnership Name:	
Louisiana municipal address of principal place of business:	
Effective date of contract:Telephone ()	
Name and municipal address of each partner: (Attach addendum if needed)	
Name	
Address	
Name	
Address	
 Name	
Address	
	Date

SS342 Rev. 01/24 (see instructions on back)

INSTRUCTIONS AND LOUISIANA PARTNERSHIP REGISTRY LAW

- 1. Attach a multiple original signed by all partners or a notarized copy of the partnership contract or amendment.
- 2. A copy of the contract of partnership certified by the secretary of state, shall be filed with recorder of mortgages of the parish in which the partnership maintains its principal place of business.
- 3. This registration does not serve as a trade name registration.

3402. Filing

The contract of partnership or a multiple original thereof, duly executed by the partners, or a certified copy thereof, or statements submitted by foreign partnerships in accordance with R.S. 9:3421, et seq. shall be filed for registry with the Secretary of State in accordance with the provisions of this Chapter to affect third persons as provided by Civil Code Articles 2806 and 2841 or when the parties choose to comply with the provisions of this Chapter.

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A contract of partnership or a statement of a foreign partnership filed for registry with the secretary of state within five days of execution exclusive of legal holidays, is deemed filed for registry on the month, day, year and hour of execution.

Section 2. The provisions of the Act shall not divest already vested rights or impair the obligation of contracts in existence on the effective date of this Act.

The provisions of this Act shall apply to all partnerships, whether created prior to, on, or subsequent to the effective date of this Act; provided that the lack of compliance with the provisions of this Act shall not affect the ownership of immovable property owned by the partnership on the effective date of this Act or limitations in existence on the effective date of this Act on the liability of partners in commendam, or limited partners.

News Release

NANCY LANDRY SECRETARY OF STATE

P.O. Box 94125 • Baton Rouge, LA 70804-9125 • www.sos.la.gov

JOEL WATSON
Deputy Secretary, Communications
2 2 5 . 9 2 2 . 0 8 2 0
joel.watson@sos.la.gov

June 12, 2025

LOUISIANA SECRETARY OF STATE'S OFFICE ISSUES CALL FOR VOTING SYSTEM AND COMPONENT CERTIFICATION

BATON ROUGE, La.— Louisiana Secretary of State Nancy Landry invites all parties seeking to have a voting system or system component certified by the State of Louisiana per recently issued standards, <u>viewable here</u>, to apply for upcoming certification opportunities.

According to Act 480 of the 2021 Regular Legislative Session, certification of a voting system or system component is a required step in order to be eligible to receive a procurement contract for Louisiana's voting system.

Certification will take place at the Louisiana Old Governor's Mansion, located at 502 North Blvd. in Baton Rouge, during the following periods:

- July 28-Aug. 1
- Aug. 25-27
- Sept. 8-12
- Sept. 15-19

Interested parties must apply using this link no later than July 11, 2025. Once the application, documentation, and application fee are received, the Secretary of State's Office will contact the applicant to arrange certification testing dates, based on availability. The fee is \$7,000 for system certification or \$3,500 for a single system component.

Vendors with questions should contact electionvendors@sos.la.gov. Members of the public will have the opportunity to view the certification testing.

###





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ELECTIONS & VOTING

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OUR OFFICE

BUSINESS SERVICES

- + Start a Business
- + Search for Louisiana Business Filings
- File Business Documents

File Original Documents

File Annual Report

File Amendments

Register Public Opinion Polls

Managed Service Providers

Get Forms & Fee Schedule

Frequently Asked Questions

- + Service of Process
- + Uniform Commercial Code

Small BIZ Protection

Beneficial Ownership Reporting (Corporate Transparency Act)

Contact Us

Schedule a Commercial Appointment (related to commercial filings only, we do not handle FinCEN filings)

FinCEN issues interim final rule removing U.S. companies and persons from the Beneficial Ownership Information (BOI) reporting requirement.

Our office is aware of fraudulent mailers being mailed to business owners from a nongovernment entity. These letters are not affiliated with our office and should be discarded.

Home > Business Services > File Business Documents > Frequently Asked Questions

Print

FREQUENTLY ASKED QUESTIONS

- ► How do I incorporate my business?
- ▶ Where can I get advice about starting a business?
- ► Can you check for name availability?
- How do I reserve a name and is it necessary?
- I am qualified in another state. What forms do I need to qualify in Louisiana?
- What is a Trade Name and/or what is the difference between a Trade Name and a Doing Business As (DBA)?
- ▶ What is a registered agent and why do I need one?
- ▶ How do I get a federal tax identification number?
- How do I get a state sales tax identification number?
- ▶ How do I get a Certificate of Good Standing?
- Did you receive my fax?
- How do I add or delete someone from my company?
- ▶ How do I print an Annual Report form from your website?
- Do I have to send my Annual Report back even if there are no changes?
- ▶ I just received the revocation notice in the mail. What do I need to do?
- > I need to get copies of my original paperwork, how do I do this?
- ► How do I dissolve my company?
- Do you have my tax ID number?
- ▶ How do I get to your building?
- Where should I send my documents?
- ▶ How do I know what industry type my business is under?
- How do I get a business license checklist if my business type is not listed in the drop down menu?
- ▶ What if I don't know where I plan on doing business?
- ▶ Who is the agent for service of process for an insurance company?

Why doesn't my checklist appear when I click the submit request button?

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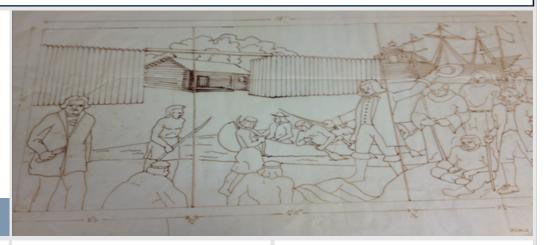


How do I register to vote?

Where do I vote?

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Reserve a business name
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NEWS & EVENTS

- Louisiana Old Governor's Mansion to partner with East Baton Rouge Parish Library for First Free Sunday event
- Qualifying procedures for the Oct. 11 Open Primary/Orleans Municipal Parochial Primary Election
- Secretary Landry announces passage of voter protection bills



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225.922.2880

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8585 Archives Ave. Baton Rouge, LA 70809



P.O. Box 94125 Baton Rouge, LA 70804-9125



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7/24/25. 11:57 AM Business Services

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Home > Business Services



The Commercial Division encompasses Corporations, geauxBIZ, Administrative Services and Uniform Commercial Code. This page is a clearinghouse for all business-related information, from searching our database to filing a business online. Access is also available to Administrative Services for service of process information and UCC.





ARE YOU STARTING A BUSINESS?

- File Online
- Forms
- · Fee Schedule
- Business License Checklist

Visit geauxBIZ for the following business start-up services:

- Find resources to help plan, make key financial decisions, and complete legal activities necessary to start a business
- Produce a list of possible federal, state and local licenses and permits required for your business
- Reserve a new business name

7/24/25, 11:57 AM Business Services

DO YOU NEED TRAINING?

We are excited to offer geauxBIZ training sessions tailored for groups interested in learning how to effectively start and manage businesses using geauxBIZ, Louisiana's online business registration and licensing tool. These sessions will provide participants with comprehensive guidance on navigating the geauxBIZ portal and completing business filings. Whether your group consists of aspiring entrepreneurs, small business owners, or students, our training is designed to empower individuals with the knowledge and skills necessary to effectively register and maintain a business in Louisiana. We can customize the sessions to fit the specific needs and interests of your group and can conduct them either virtually or in person.

Contact us today to schedule a session and take the first step toward entrepreneurial success with geauxBIZ!

ARE YOU UPDATING OR RESEARCHING A BUSINESS?

- Order Copies or Certificates Online
- Commercial Database
- Forms

- File Annual Report
- File Amendments
- Fee Schedule

DO YOU NEED OTHER COMMERCIAL SERVICES?

- Political Subdivisions
- Certificate Validation
- Corporation Newsletters
- Notary & Certifications
- Administrative Services
- Uniform Commercial Code
- Notary Database

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File Annual Report

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Register Public Opinion Polls

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FILE BUSINESS DOCUMENTS

The Secretary of State is aware that many transactions in the business and financial world are time sensitive. To better serve the public, GeauxBiz.com provides online filings; forms for downloading; accepts filings by regular mail, express mail and fax; expedited filings; online certificate validation and a range of payment methods.

Online Filing

The Commercial Division offers online document filings for all original filings, several amendments and annual report filings for all entity types. Please visit our website as directed below:

- File Original Documents
- File Amendments
- File Annual Reports

Visit geauxBIZ

The Louisiana Secretary of State, Louisiana Department of Revenue, and Louisiana Workforce Commission are working to make it easy for you to manage your Louisiana business filings and tax account registrations from one location—the Louisiana geauxBIZ portal. geauxBIZ can help you find resources to help plan, make key financial decisions, and complete legal activities necessary to start your business. You can also use geauxBIZ to produce a list of possible federal, state and local licenses and permits required for your business, to reserve your new business name, and to complete your new business filing. If you want to do business in Louisiana, visit geauxBIZ to get started!

Walk-in Customer Service

Schedule An Appointment

The Secretary of State offers customers the convenience of walk-in service. Documents may be processed while the customer waits for a \$50 priority expedite fee or processed in 24 hours for a \$30 expedite fee. All expedite fees are in addition to the required filing fee. The forms furnished by the Secretary of State, and the publications which are compiled by the Secretary of State are available. Documents may be delivered for processing on a non-expedited basis. The customer may leave a mailing address or a telephone number for notification when processing is complete.

The office is at 8585 Archives Avenue, Baton Rouge, LA 70809 and is located in the building behind the Louisiana State Archives. Hours of operation are Monday through Friday from 8 a.m. to 4:30 p.m. Please try to arrive by 4 p.m. to give the employees enough time to complete the filing.

Fax Filing

File Business Documents

The Commercial Division accepts facsimile filings for business entities. The original document must comply with the appropriate statutes, including signature requirements. A cover sheet or letter must be included containing the name and contact person, their phone number, the mailing address, and special instructions, if any. Fax filings for business entities should specify whether expedited handling is requested. The following fax number can be used for transmitting Business organization filings 225.932.5314.

Expedited Filing

The Secretary of State expedites the filing of business organization documents as well as the issuance of certified copies and certificates relating to those documents. Expedited service means that the documents are processed before other documents received the same day.

Payment Methods

- Check (personal or business) All checks should be made payable to the Secretary of State
- · Money order
- Cash (Cash should not be sent in the mail)
- Credit Card (Visa, Master Card, Discover and American Express)*

*Credit card payments are subject to an additional statutory convenience fee of \$5

Document Compliance

Prior to submitting documents to the Secretary of State for filing, check that the following are complied with, if applicable. The document must meet all requirements:

- · contain the correct entity name;
- · be dated;
- · have all the required signatures;
- be notarized (when required by statute);
- · contain municipal street addresses, not post office box numbers (mailing purpose only);
- have the required adjustment in the corporate name such as Inc., Corp., Ltd., or Co., Incorporated, Corporation, Limited, Company;
- have the required adjustment in the Limited Liability Company name such as L.L.C., L.C. or Limited Liability Company;
- have the required adjustment in the partnership name such as Registered Limited Liability Partnership or L.L.P. when applicable;
- · be accompanied by the required filing fee;
- be accompanied by the certificate of good standing or existence when qualifying a foreign corporation or Limited Liability Company;
- be accompanied by an affidavit of registered agent if a registered agent is being appointed;
- · be accompanied by a description of the logo if a logo is attached to a trade name registration; and
- contain the notary number and printed or typed names of the notary and witnesses.

Before submitting articles of incorporation, articles of organization and trade names, a preliminary check of the name is advisable. Preliminary checks may be made by phone by calling 225.925.4704, by fax 225.932.5314, or by mail to P.O. Box 94125, Baton Rouge, LA 70804-9125. Reservation of names are available for a fee of \$25. The name may be reserved for a period of 60 days. Two 30 day extensions are available upon request.

Name Availability

Corporate, limited liability company, trade names, trademarks and service marks must be checked for availability. A preliminary check may be made by phone at 225.925.4704, by fax to 225.932.5314, or by mail to P.O. Box 94125, Baton Rouge, LA 70804.

Names can be reserved for 120 days by filing an application for reservation and the requisite \$25 filing fee with the Secretary of State. If you are reserving a trade mark or service mark, they must be reserved under a class number. The class numbers are listed on the back of the reservation application. The fee is \$25 per class.

Names checked for availability must be distinguishable from corporate, limited liability company and trade names already on file, or reserved, in the Secretary of State's office. In addition to checking names by various spellings (Cajun vs. Kajun), names are checked phonetically (excellent vs. x e lent). (Partnership names do not conflict and are not considered when checking name availability for the above listed entities. Trademarks and service marks are only conflicted with other trademarks and service marks registered in the same class.) No corporate or limited liability company name shall contain the phrase "doing business as" or the abbreviation "d/b/a". The names of revoked Louisiana corporations and limited liability companies are not available for a three year period after the date of revocation.

Louisiana Business Corporations

The name shall not imply that the corporation is an administrative agency of any parish or of this state or of the United States. The following are words which are prohibited from use in Louisiana business corporate names, except for bank holding companies: bank, banker, banking, savings, safe deposit, trust, trustee, building and/or loan, homestead, insurance, casualty, redevelopment corporation, electric cooperative, and credit union. No corporation shall use the word insurance in its name except for an independent insurance agency or brokerage.

Written waivers from two state boards are required for use of certain words in corporate names. If "engineer", "engineering", "surveyor" or "surveying" will be part of the corporate name, a waiver must be obtained from the Louisiana Professional Engineering & Land Surveying Board, 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809-1443, 225.925.6291. In order to include "architect," "architectural" or "architecture," a waiver must be obtained from the Louisiana State Board of Architectural Examiners, 8017 Jefferson Highway, Suite B2, Baton Rouge, LA 70809, 225.925.4802. In order to include the form of the words "bank" or "trust," a waiver must be obtained from the Office of Financial Institutions, P.O. Box 94095, Baton Rouge, LA 70804, 225.925.4548.

Louisiana Nonprofit Corporations

The corporate name shall not imply that the corporation is an administrative agency of any parish or of this state or of the United States. It shall not contain any of the following words: bank, banking, banker, savings, trust, deposit, insurance, mutual, assurance, indemnity, casualty, fiduciary, homestead, building and loan, surety, security, guarantee, cooperative, state, parish, redevelopment corporation, electric cooperative or credit union.

If you are forming a nonprofit corporation and intend to apply to the Internal Revenue Service for tax exempt status, additional information will be required in the articles of incorporation. Exemption information must be obtained from the Internal Revenue Service website or call toll free at 877.829.5500. If the required information is not included in the articles of incorporation the Internal Revenue Service will direct you to amend the articles. This office, as well as the Clerks of Court's offices, will require an additional fee to file an amendment to the articles of incorporation.

Foreign Business and Nonprofit Corporations

If the corporation applying for a Certificate of Authority contains the word "engineer", "engineering", "surveyor" or "surveying" in its name, a waiver must be obtained from the Louisiana Professional Engineering & Land Surveying Board, 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809-1443, 225.925.6291.

Louisiana Limited Liability Companies

The name shall not imply that the corporation is an administrative agency of any parish or of this state or of the United States. The LLC name shall not contain any word or phrase which indicates or implies that it is organized for any purpose not lawful for a limited liability company or contrary to its articles of organization. A limited liability company shall not be formed for the purpose of banking or insurance underwriting in all of their several forms or for the purpose of operating homesteads or building and loan associations.

Conversion of Business Entities

Business corporations, limited liability companies and general and limited partnerships can convert to another type of business entity by filing a conversion application with the Secretary of State. The requirements of the application vary according to the type of organizational form of the converted entity. A thorough reading of the statute is suggested (Louisiana R.S. 12:1601). Please call the Commercial Division for additional information at 225.925.4704.

Collection Agency Registration

Collection agencies that do business in Louisiana are registered with the Secretary of State. Registered Agencies will be listed alphabetically in the Commercial Database.

Trade Names, Trademarks and Service Marks

The laws governing registration of trade names, trademarks and service marks are extensive. A thorough reading of Louisiana Trade and Commerce Law is advisable.

Louisiana Professional Corporations

A business corporation may be formed in compliance with the laws governing several types of professions. The professional corporations generally are limited to their particular type of business, and may hold property for investment or in connection with their practice. The following professional corporations must contain the full or last name or names of one or more voting shareholders, former voting shareholders or members of a predecessor firm: law, dental, accounting, chiropractic, nursing and optometry. The following professional corporation names may comply with the above, or may consist of any name approved by the Secretary of State:

- medical
- architectural
- psychology
- veterinary
- architectural-engineering
- occupational therapy
- social work

With the exception of architectural-engineering, all professional corporation names must end with a "professional" ending.

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STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



RESERVATION OF CORPORATE/LIMITED LIABILITY COMPANY/ L3C/PARTNERSHIP NAME

(R.S. 12:1-402A, 12:204, 12:303, 12:1307, 12:1344)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State, State of Louisia	na is requested to reserve the following name for u	se as a
corporate/limited liability company/L3C/	partnership name:	
Said name is requested to be reserved	on behalf of	
for a period of 120 days from the date o	f your receipt of this application.	
	Name	
	Address	
	City/State/Zip	
	Area code/phone number	
	Submitted by:	
		ate

If the requested name is not available, please return this application and the filing fee to the above.

- 1. Names can be reserved for 120 days by filing an application for reservation and the requisite \$25 filing fee with the secretary of state.
- 2. Name availability can be preliminarily checked by calling the Secretary of State's Office; however, telephone name searches are preliminary checks only and should not be relied upon.
- 3. Corporate names (for business corporations) must end with or include the words "Corporation," "Incorporated" or "Limited," or the abbreviation of any of these words, or may instead contain the word "Company" or the abbreviation "Co." if not immediately preceded by the word "and" or the symbol "&."
- 4. Limited liability company names should contain the words "Limited Liability Company," or the abbreviation "L.L.C.," or "L.C." No limited liability company shall include in its name any words which deceptively or falsely suggest a charitable or nonprofit nature.
- 5. L3C names shall contain the words "Limited Liability Company," or the abbreviation "L3C" or the abbreviation "I3c."
- 6. Corporate and limited liability company names shall not imply that the company is an administrative agency of any parish or of this state or of the United States.
- 7. Subject to limited exceptions, a corporate, limited liability company, L3C or partnership name must be distinguishable from other corporate, limited liability company, partnership or trade names previously registered with the Secretary of State's Office. Other rules do apply. A thorough reading of the laws pertaining to corporate, limited liability company and partnership names is required, or you may consult the attorney of your choice.
- 8. Filing a Reservation of Corporate/Limited Liability Company/L3C/Partnership Name does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Please indicate below	the level of service request	ed, payment and contact information	
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Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



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(R.S. 12:1-402A, 12:204, 12:303, 12:1307, 12:1344)

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Said name is requested to be reserved	on behalf of	
for a period of 120 days from the date o	f your receipt of this application.	
	Name	
	Address	
	City/State/Zip	
	Area code/phone number	
	Submitted by:	
		ate

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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry



RESERVATION TRANSFER

R.S. 12:1-402(B)

Return to: Commercial Division

A CONTINUE STATE OF THE PARTY OF	Enclose \$25 filing fee M remittance payable Secretary of State Do Not Send Cash	Take to	P.O. F Baton (225)	Sox 94125 Rouge, LA 70804-9125 925-4704 sos.la.gov
Transfer of: () () ()	Corporation Name Limited Liability Company Name Partnership Name	() ()	Trade Mark	(Class:) (Class:)
I,	(Transferor/original owner)			er of reservation of
	(reserved	name/trade mark/service mark)		
to:		(Transferee's Name)		
		(Transferee's Address)		
		(City, State, & Zip Code)		
on behalf of				
	(New Name)			
for the remainder of	the reservation period.			
				Transferor's Signature
				Date
SS402 Rev.05/25				

- 1. Reservations that are filed for corporations, limited liability companies, partnerships, trade names, trade marks, and service marks can be transferred from one owner to another owner by filing the Reservation Transfer.
- 2. Once the Reservation Transfer is filed, the transferee (new owner) takes possession of the reservation for the remainder of the reservation period.
- 3. When the reservation period expires, a new reservation may be filed by filing an Application for Reservation along with the requisite \$25 filing fee with the secretary of state.
- 4. Filing a reservation or the transferring of an existing reservation does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

Nancy Landry



RESERVATION TRANSFER

R.S. 12:1-402(B)

Return to: Commercial Division

A CONTINUE STATE OF THE PARTY OF	Enclose \$25 filing fee M remittance payable Secretary of State Do Not Send Cash	Take to	P.O. F Baton (225)	Sox 94125 Rouge, LA 70804-9125 925-4704 sos.la.gov
Transfer of: () () ()	Corporation Name Limited Liability Company Name Partnership Name	() ()	Trade Mark	(Class:) (Class:)
I,	(Transferor/original owner)			er of reservation of
	(reserved	name/trade mark/service mark)		
to:		(Transferee's Name)		
		(Transferee's Address)		
		(City, State, & Zip Code)		
on behalf of				
	(New Name)			
for the remainder of	the reservation period.			
				Transferor's Signature
				Date
SS402 Rev.05/25				

- 1. Reservations that are filed for corporations, limited liability companies, partnerships, trade names, trade marks, and service marks can be transferred from one owner to another owner by filing the Reservation Transfer.
- 2. Once the Reservation Transfer is filed, the transferee (new owner) takes possession of the reservation for the remainder of the reservation period.
- 3. When the reservation period expires, a new reservation may be filed by filing an Application for Reservation along with the requisite \$25 filing fee with the secretary of state.
- 4. Filing a reservation or the transferring of an existing reservation does not formally adopt the name.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN LOUISIANA

(R.S. 12:304)



Foreign Corporation
Enclose \$125 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF	Check one:	() Non Profit () Business	Check one:	() Original Application() Amended Application
PARISH/COUNTY OF		() business		() Amended Application
Corporation name:				
0.0				
3. Principal office address in state or country of in	ncorporation:			
Federal tax identification number:				
Principal business office address:				
	LUDE COMPLETE STRE			
6. Principal business establishment in Louisiana:	:			
7. Registered office address in Louisiana:				
Registered agent's name and address in Louis	siana:			
9. Nature of business to be transacted in Louisian	na:			
10. Names and addresses of directors and officer	rs:			
To be signed by any officer				Title and Date
Sworn to and subscribed before me, the undersign	ned Notary Public, on this	s date:		
	Notary			
	NCE AND ACKNOWLED			
I hereby acknowledge and accept the appointmer	nt of registered agent for	and on behalf of the a	above named corpo	ration.
	Registered Age	ent		
Sworn to and subscribed before me on this date:				
	Notary			
3326 Rev. 01/24				

State of Louisiana Secretary of State

Nancy Landry Secretary of State



IMPORTANT NOTICE

The instructions from the Secretary of State's Office in order to qualify a foreign corporation to do business in the state of Louisiana are the following:

- 1. The name must be identical to the name on certificate of existence or good standing from incorporating jurisdiction. The certificate must be dated within 90 days of its submission.(In the states of Texas and Alabama, obtain a certificate of existence from the Secretary of State, not a good standing from the Comptroller/Department of Revenue.)
- 2. The name must be identical to the name on the certificate of fact evidencing the name change issued by the proper official of the incorporating jurisdiction.
- The street address of the principal office of the corporation in the state or country under the laws of which it is incorporated.
- 4. The failure to include the federal taxpayer identification number of the corporation shall not invalidate nor cause the Secretary of State to reject the application.
- The street address or intended street address of its principal business office wherever located. If you do not have one, write none in this space.
- 6. If none, registered agent's address is deemed to be the principal business establishment.
- 7. This address shall be the street address of your registered agent if the agent is an individual or corporation.
- 8. The agent must be an individual resident in Louisiana, an individual attorney or a partnership which is authorized to practice law in Louisiana or a domestic or foreign corporation authorized to act as registered agent for other corporations.
- 9. To be completed only if the corporation proposes to limit its authority in Louisiana.
- 10. Attach addendum if needed for additional officers and directors.
- NOTE: If the corporation includes in its name the words "engineer," "engineering," "surveyor," or "surveying," please contact the Louisiana Professional Engineering and Land Surveying Board prior to submitting the application for authority. They can be contacted by phone (225) 925-6291, by mail at 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809 or online at www.lapels.com.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN LOUISIANA

(R.S. 12:304)



Foreign Corporation
Enclose \$125 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF	Check one:	() Non Profit () Business	Check one:	() Original Application() Amended Application
PARISH/COUNTY OF		() business		() Amended Application
Corporation name:				
0.0				
3. Principal office address in state or country of in	ncorporation:			
Federal tax identification number:				
Principal business office address:				
	LUDE COMPLETE STRE			
6. Principal business establishment in Louisiana:	:			
7. Registered office address in Louisiana:				
Registered agent's name and address in Louis	siana:			
9. Nature of business to be transacted in Louisian	na:			
10. Names and addresses of directors and officer	rs:			
To be signed by any officer				Title and Date
Sworn to and subscribed before me, the undersign	ned Notary Public, on this	s date:		
	Notary			
	NCE AND ACKNOWLED			
I hereby acknowledge and accept the appointmer	nt of registered agent for	and on behalf of the a	above named corpo	ration.
	Registered Age	ent		
Sworn to and subscribed before me on this date:				
	Notary			
3326 Rev. 01/24				

State of Louisiana Secretary of State

Nancy Landry Secretary of State



IMPORTANT NOTICE

The instructions from the Secretary of State's Office in order to qualify a foreign corporation to do business in the state of Louisiana are the following:

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- 2. The name must be identical to the name on the certificate of fact evidencing the name change issued by the proper official of the incorporating jurisdiction.
- The street address of the principal office of the corporation in the state or country under the laws of which it is incorporated.
- 4. The failure to include the federal taxpayer identification number of the corporation shall not invalidate nor cause the Secretary of State to reject the application.
- The street address or intended street address of its principal business office wherever located. If you do not have one, write none in this space.
- 6. If none, registered agent's address is deemed to be the principal business establishment.
- 7. This address shall be the street address of your registered agent if the agent is an individual or corporation.
- 8. The agent must be an individual resident in Louisiana, an individual attorney or a partnership which is authorized to practice law in Louisiana or a domestic or foreign corporation authorized to act as registered agent for other corporations.
- 9. To be completed only if the corporation proposes to limit its authority in Louisiana.
- 10. Attach addendum if needed for additional officers and directors.
- NOTE: If the corporation includes in its name the words "engineer," "engineering," "surveyor," or "surveying," please contact the Louisiana Professional Engineering and Land Surveying Board prior to submitting the application for authority. They can be contacted by phone (225) 925-6291, by mail at 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809 or online at www.lapels.com.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STATEMENT OF CHANGE OF REGISTERED OFFICE, REGISTERED AGENT AND/OR PRINCIPAL BUSINESS ESTABLISHMENT IN LOUISIANA

(R.S. 12:308 & 12:1350)

Foreign Corporation/Foreign Limited Liability Company Enclose \$25 filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
Phone (225) 925-4704
www.sos.la.gov

STATE OF	
PARISH/COUNTY	
	below named corporation/limited liability company has changed its registered office, orincipal business establishment.
Company Name:	
Complete the following s	ections, where applicable:
New Registered Office a	ddress:
New Registered Agent a	nd address:
(agent's address must b	pe identical to registered office unless agent is a law partnership or an individual attorney)
New address of Principa	I Business Establishment in Louisiana:
·	
	President or Vice President/Manager or Member (Registered agent if only registered office is changed)
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
	Notary
	S ACCEPTANCE AND ACKNOWLEDGEMENT OF APPOINTMENT pt my appointment as agent for the above named corporation/limited liability
	Agent
O	
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
_	
•	Notary

- 1. If a foreign corporation or limited liability company changes its registered office address, its registered agent, or the address of its principal business establishment in this state, a Statement of Change must be filed with the secretary of state. This form should be filed (in duplicate) with the Secretary of State's Office along with the \$25 filing fee.
- 2. If the only change made is the address of the registered office, this form need only be executed and acknowledged before a notary public by the registered agent.
- 3. If the registered agent is changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company, and the new agent must execute the Agent's Acceptance and Acknowledgment of Appointment.
- 4. If the principal business establishment address has changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager or member for a limited liability company.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STATEMENT OF CHANGE OF REGISTERED OFFICE, REGISTERED AGENT AND/OR PRINCIPAL BUSINESS ESTABLISHMENT IN LOUISIANA

(R.S. 12:308 & 12:1350)

Foreign Corporation/Foreign Limited Liability Company Enclose \$25 filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
Phone (225) 925-4704
www.sos.la.gov

STATE OF	
PARISH/COUNTY	
	below named corporation/limited liability company has changed its registered office, orincipal business establishment.
Company Name:	
Complete the following s	ections, where applicable:
New Registered Office a	ddress:
New Registered Agent a	nd address:
(agent's address must b	pe identical to registered office unless agent is a law partnership or an individual attorney)
New address of Principa	I Business Establishment in Louisiana:
·	
	President or Vice President/Manager or Member (Registered agent if only registered office is changed)
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
	Notary
	S ACCEPTANCE AND ACKNOWLEDGEMENT OF APPOINTMENT pt my appointment as agent for the above named corporation/limited liability
	Agent
O	
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
_	
•	Notary

- 1. If a foreign corporation or limited liability company changes its registered office address, its registered agent, or the address of its principal business establishment in this state, a Statement of Change must be filed with the secretary of state. This form should be filed (in duplicate) with the Secretary of State's Office along with the \$25 filing fee.
- 2. If the only change made is the address of the registered office, this form need only be executed and acknowledged before a notary public by the registered agent.
- 3. If the registered agent is changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company, and the new agent must execute the Agent's Acceptance and Acknowledgment of Appointment.
- 4. If the principal business establishment address has changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager or member for a limited liability company.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STATEMENT OF CHANGE OF DIRECTORS AND/OR OFFICERS OF A FOREIGN CORPORATION

Enclose \$25 filing fee Foreign Corporation Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division

P. O. Box 94125

Baton Rouge, LA 70804-9125 (225) 925-4704

(225) 925-4704 www.sos.la.gov

REMOVAL O	F DIRECTORS AND/OR OFFICERS	
ce is hereby given that the Board of D following: Only the titles indicated will	irectors of the above named corporation has authorized the be removed.	removal o
Name and Title	Name and Title	-
Name and Title	Name and Title	_
Name and Title	Name and Title	-
	To be signed by an officer or a director OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the act added.	
e is hereby given that the Board of Dir	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the a	
e is hereby given that the Board of Dire llowing: <i>Only the titles indicated will be</i> Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the as added. Municipal Address	
e is hereby given that the Board of Dir llowing: <i>Only the titles indicated will be</i>	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the a	
e is hereby given that the Board of Dire llowing: <i>Only the titles indicated will be</i> Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the as added. Municipal Address	
e is hereby given that the Board of Dir llowing: <i>Only the titles indicated will be</i> Name and Title Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the act added. Municipal Address Municipal Address	
e is hereby given that the Board of Directlowing: <i>Only the titles indicated will be</i> Name and Title Name and Title Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the act added. Municipal Address Municipal Address Municipal Address	Date Date Date Date Date Date Date Date

SS346A Rev. 01/24 (See instructions on back)

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2.	The Change of Director(s) and/or Officer(s) must be authorized by the Board of Directors of the
	corporation, and signed by an officer or director.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STATEMENT OF CHANGE OF DIRECTORS AND/OR OFFICERS OF A FOREIGN CORPORATION

Enclose \$25 filing fee Foreign Corporation Make remittance payable to Secretary of State

Do Not Send Cash

Return to: Commercial Division

P. O. Box 94125

Baton Rouge, LA 70804-9125 (225) 925-4704

(225) 925-4704 www.sos.la.gov

REMOVAL O	F DIRECTORS AND/OR OFFICERS	
ce is hereby given that the Board of D following: Only the titles indicated will	irectors of the above named corporation has authorized the be removed.	removal o
Name and Title	Name and Title	-
Name and Title	Name and Title	_
Name and Title	Name and Title	-
	To be signed by an officer or a director OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the act added.	
e is hereby given that the Board of Dir	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the a	
e is hereby given that the Board of Dire llowing: <i>Only the titles indicated will be</i> Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the as added. Municipal Address	
e is hereby given that the Board of Dir llowing: <i>Only the titles indicated will be</i>	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the a	
e is hereby given that the Board of Dire llowing: <i>Only the titles indicated will be</i> Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the as added. Municipal Address	
e is hereby given that the Board of Dir llowing: <i>Only the titles indicated will be</i> Name and Title Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the act added. Municipal Address Municipal Address	
e is hereby given that the Board of Directlowing: <i>Only the titles indicated will be</i> Name and Title Name and Title Name and Title	OF DIRECTORS AND/OR OFFICERS ectors of the above named corporation has authorized the act added. Municipal Address Municipal Address Municipal Address	Date Date Date Date Date Date Date Date

SS346A Rev. 01/24 (See instructions on back)

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2.	The Change of Director(s) and/or Officer(s) must be authorized by the Board of Directors of the
	corporation, and signed by an officer or director.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



APPLICATION FOR WITHDRAWAL OF A FOREIGN CORPORATION/ LIMITED LIABILITY COMPANY FROM THE STATE OF LOUISIANA (R.S. 12:312 & 12:1351)

Enclose \$125 (Corporation) filing fee \$150 (Limited Liability Company) filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF				
PARISH/COUNTY OF				
Company Name				
organized under the laws of the state/country of is no longer transacting business in				
the State of Louisiana, effective surrenders its authority to transact business in the				
state of Louisiana; revokes the authority of its registered agent to accept service of process, and consents that				
service of process in any action or proceeding based on any cause of action arising out of or resulting from or				
connected with any business transacted by it in this State during the time the company was authorized to transact				
business in this State, be made on the company by service thereof on the Secretary of State, or on a person in his				
office designated to receive service of process; such service, if made on the Secretary of State.				
Service of Process address:				
Officer/Manager or Member Date				
Sworn to and subscribed before me, the undersigned Notary Public, on this date:				
Notary				

SS338 Rev. 01/24 (see instructions on back)

- 1. A foreign corporation or limited liability company authorized to transact business in this state may withdraw from this state upon procuring from the Secretary of State a Certificate of Withdrawal.
- 2. In order to obtain a Certificate of Withdrawal, this application must be executed in duplicate by any officer for a corporation, or by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company. The application must be acknowledged by the signing party before a notary public. (If the withdrawal is for a corporation which is in the hands of a receiver or a trustee, this form shall be executed on behalf of the corporation by such receiver or trustee and acknowledged by him.)
- 3. A Certificate of Withdrawal shall be issued when all fees, charges, taxes, unemployment compensation, distributions and interest have been paid as required by law and evidenced by certificates of the Collector of Revenue and the Administrator of the Division of Employment Security of the Department of Labor. (The Secretary of State's Office requests these certificates from the above offices.)
- 4. Upon the issuance of a Certificate of Withdrawal, the authority of the company to transact business in Louisiana shall cease.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



APPLICATION FOR WITHDRAWAL OF A FOREIGN CORPORATION/ LIMITED LIABILITY COMPANY FROM THE STATE OF LOUISIANA (R.S. 12:312 & 12:1351)

Enclose \$125 (Corporation) filing fee \$150 (Limited Liability Company) filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF				
PARISH/COUNTY OF				
Company Name				
organized under the laws of the state/country of is no longer transacting business in				
the State of Louisiana, effective surrenders its authority to transact business in the				
state of Louisiana; revokes the authority of its registered agent to accept service of process, and consents that				
service of process in any action or proceeding based on any cause of action arising out of or resulting from or				
connected with any business transacted by it in this State during the time the company was authorized to transact				
business in this State, be made on the company by service thereof on the Secretary of State, or on a person in his				
office designated to receive service of process; such service, if made on the Secretary of State.				
Service of Process address:				
Officer/Manager or Member Date				
Sworn to and subscribed before me, the undersigned Notary Public, on this date:				
Notary				

SS338 Rev. 01/24 (see instructions on back)

- 1. A foreign corporation or limited liability company authorized to transact business in this state may withdraw from this state upon procuring from the Secretary of State a Certificate of Withdrawal.
- 2. In order to obtain a Certificate of Withdrawal, this application must be executed in duplicate by any officer for a corporation, or by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company. The application must be acknowledged by the signing party before a notary public. (If the withdrawal is for a corporation which is in the hands of a receiver or a trustee, this form shall be executed on behalf of the corporation by such receiver or trustee and acknowledged by him.)
- 3. A Certificate of Withdrawal shall be issued when all fees, charges, taxes, unemployment compensation, distributions and interest have been paid as required by law and evidenced by certificates of the Collector of Revenue and the Administrator of the Division of Employment Security of the Department of Labor. (The Secretary of State's Office requests these certificates from the above offices.)
- 4. Upon the issuance of a Certificate of Withdrawal, the authority of the company to transact business in Louisiana shall cease.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS403 Rev. 01/24

FOREIGN CORPORATION NAME REGISTRATION R.S. 12:1-403

Enclose \$25 filing fee

Make remittance payable to Secretary of State

Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704

www.sos.la.gov

Check or	ne: () Original () Renewal	
1.	Foreign Corporation Name:	
2.	State (or Country) of Incorporation:	
3.	Date of Incorporation:	
4.	Nature of Business:	
5.	Submitted by:	
	Printed Name	
	Address	
	City/State/Zip	
		Officer's Signature
		Title
		Date

- 1. A foreign corporation may register its corporate name by filing a Foreign Corporation Name Registration form, a certificate of good standing or existence from the incorporating jurisdiction dated within 90 days of its receipt to our office, along with the requisite \$25 filing fee with the Secretary of State's Office.
- 2. The name must be identical to the name on the certificate of good standing or existence from the incorporating jurisdiction.
- 3. Corporate names must end with or include the words "Corporation," "Incorporated," "Company," or "Limited," or the abbreviation of any of these words.
- 4. The Foreign Corporation Name Registration is renewable every year between Oct. 1 and Dec. 31, regardless of the date of registration, by filing the Foreign Corporation Name Registration form marked "renewal" along with the requisite \$25 filing fee.
- 5. Filing a Foreign Corporation Name Registration is not equivalent to filing the Application for Certificate of Authority to Transact Business. In the event that the corporation wishes to authorize to transact business in Louisiana, an Application for Certificate of Authority to Transact Business (Form SS326) must be filed.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS403 Rev. 01/24

FOREIGN CORPORATION NAME REGISTRATION R.S. 12:1-403

Enclose \$25 filing fee

Make remittance payable to Secretary of State

Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704

www.sos.la.gov

Check or	ne: () Original () Renewal	
1.	Foreign Corporation Name:	
2.	State (or Country) of Incorporation:	
3.	Date of Incorporation:	
4.	Nature of Business:	
5.	Submitted by:	
	Printed Name	
	Address	
	City/State/Zip	
		Officer's Signature
		Title
		Date

- 1. A foreign corporation may register its corporate name by filing a Foreign Corporation Name Registration form, a certificate of good standing or existence from the incorporating jurisdiction dated within 90 days of its receipt to our office, along with the requisite \$25 filing fee with the Secretary of State's Office.
- 2. The name must be identical to the name on the certificate of good standing or existence from the incorporating jurisdiction.
- 3. Corporate names must end with or include the words "Corporation," "Incorporated," "Company," or "Limited," or the abbreviation of any of these words.
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STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

STATE OF LOUISIANA

SECRETARY OF STATE

Nancy Landry Secretary of State



Commercial Division (225) 925-4704

Fax Numbers (225) 932-5317 Administrative Services (225) 932-5314 Corporations (225) 922-0452 UCC

IMPORTANT NOTICE

The instructions from the Secretary of State's Office in order to qualify a foreign limited liability company to do business in the State of Louisiana are the following:

- 1. The name must be identical to the name on certificate of existence or good standing from organizing jurisdiction. The certificate must be dated within 90 days of its submission. (In the states of Texas and Alabama, obtain a certificate of existence from the secretary of state, not a good standing from the Comptroller/Department of Revenue.)
- 2. The name must be identical to the name on the certificate of fact evidencing the name change issued by the proper official of the organizing jurisdiction.
- 3. The date organized in your state or country and period of duration, if any.
- 4. The street address of the principal office of the organization in the state or country under the laws of which it is organized.
- 5. The street address or intended street address of its principal business office wherever located. If you do not have one, write none in this space.
- 6. The address of the principal business establishment in this state.
- 7. This address shall be the street address of your registered agent if the agent is an individual or corporation.
- 8. The agent must be an individual resident in Louisiana, an individual attorney or a partnership which is authorized to practice law in Louisiana or a domestic or foreign corporation authorized to act as registered agent for other organizations.
- 9. The nature of business that the limited liability company proposes to transact in this state and a statement that it is empowered to transact such business under the laws under which it is organized.
 - NOTE: If the company includes in its name the words "engineer," "engineering," "surveyor," or "surveying," please contact the Louisiana Professional Engineering and Land Surveying Board prior to submitting the application for authority. They can be contacted by phone at (225) 925-6291, by mail at 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809 or www.lapels.com.
- 10. The name and addresses of the company's members and managers. Attached addendum if needed for additional members and managers.

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN LOUISIANA

(R.S. 12:1345)



Foreign Limited Liability Company
Enclose \$150 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF	Check one:	() Non Profit () Business	Check one:	() Original Application
PARISH/COUNTY OF		() business		() Amended Application
Limited liability company name:				
2. Previous name:				
Date of organization:		Period of duration:		
4. Principal office address in state or country of	organization:			
5. Principal business office address:				
	CLUDE COMPLETE STR			
6. Principal business establishment in Louisiana	a:			
7. Registered office address in Louisiana:				
8. Registered agent's name and address in Lou	uisiana:			
Nature of business to be transacted in Louisi	iana:			
10. Names and addresses of members and mar	nagers:			
To be signed by a Member/Manager				Title and Date
0	d.N. da Daddie de			
Sworn to and subscribed before me, the undersi	gned Notary Public, on thi	is date:		
	Notary			
AGENT'S ACCEPTA	ANCE AND ACKNOWLE	DGEMENT OF APPO	INTMENT	
I hereby acknowledge and accept the appointment	ent of registered agent for	and on behalf of the a	above named corpo	oration.
	Registered Ag	ent		
Sworn to and subscribed before me on this date:	:			
	Notary			
972 Rev. 01/24				

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	

STATE OF LOUISIANA

SECRETARY OF STATE

Nancy Landry Secretary of State



Commercial Division (225) 925-4704

Fax Numbers (225) 932-5317 Administrative Services (225) 932-5314 Corporations (225) 922-0452 UCC

IMPORTANT NOTICE

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- 1. The name must be identical to the name on certificate of existence or good standing from organizing jurisdiction. The certificate must be dated within 90 days of its submission. (In the states of Texas and Alabama, obtain a certificate of existence from the secretary of state, not a good standing from the Comptroller/Department of Revenue.)
- 2. The name must be identical to the name on the certificate of fact evidencing the name change issued by the proper official of the organizing jurisdiction.
- 3. The date organized in your state or country and period of duration, if any.
- 4. The street address of the principal office of the organization in the state or country under the laws of which it is organized.
- 5. The street address or intended street address of its principal business office wherever located. If you do not have one, write none in this space.
- 6. The address of the principal business establishment in this state.
- 7. This address shall be the street address of your registered agent if the agent is an individual or corporation.
- 8. The agent must be an individual resident in Louisiana, an individual attorney or a partnership which is authorized to practice law in Louisiana or a domestic or foreign corporation authorized to act as registered agent for other organizations.
- 9. The nature of business that the limited liability company proposes to transact in this state and a statement that it is empowered to transact such business under the laws under which it is organized.
 - NOTE: If the company includes in its name the words "engineer," "engineering," "surveyor," or "surveying," please contact the Louisiana Professional Engineering and Land Surveying Board prior to submitting the application for authority. They can be contacted by phone at (225) 925-6291, by mail at 9643 Brookline Ave., Suite 121, Baton Rouge, LA 70809 or www.lapels.com.
- 10. The name and addresses of the company's members and managers. Attached addendum if needed for additional members and managers.

APPLICATION FOR AUTHORITY TO TRANSACT BUSINESS IN LOUISIANA

(R.S. 12:1345)



Foreign Limited Liability Company
Enclose \$150 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF	Check one:	() Non Profit () Business	Check one:	() Original Application
PARISH/COUNTY OF		() business		() Amended Application
Limited liability company name:				
2. Previous name:				
Date of organization:		Period of duration:		
4. Principal office address in state or country of	organization:			
5. Principal business office address:				
	CLUDE COMPLETE STR			
6. Principal business establishment in Louisiana	a:			
7. Registered office address in Louisiana:				
8. Registered agent's name and address in Lou	uisiana:			
Nature of business to be transacted in Louisi	iana:			
10. Names and addresses of members and mar	nagers:			
To be signed by a Member/Manager				Title and Date
0	d.N. da Daddie de			
Sworn to and subscribed before me, the undersi	gned Notary Public, on thi	is date:		
	Notary			
AGENT'S ACCEPTA	ANCE AND ACKNOWLE	DGEMENT OF APPO	INTMENT	
I hereby acknowledge and accept the appointment	ent of registered agent for	and on behalf of the a	above named corpo	oration.
	Registered Ag	ent		
Sworn to and subscribed before me on this date:	:			
	Notary			
972 Rev. 01/24				

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STATEMENT OF CHANGE OF REGISTERED OFFICE, REGISTERED AGENT AND/OR PRINCIPAL BUSINESS ESTABLISHMENT IN LOUISIANA

(R.S. 12:308 & 12:1350)

Foreign Corporation/Foreign Limited Liability Company Enclose \$25 filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
Phone (225) 925-4704
www.sos.la.gov

STATE OF	
PARISH/COUNTY	
	below named corporation/limited liability company has changed its registered office, orincipal business establishment.
Company Name:	
Complete the following s	ections, where applicable:
New Registered Office a	ddress:
New Registered Agent a	nd address:
(agent's address must b	pe identical to registered office unless agent is a law partnership or an individual attorney)
New address of Principa	I Business Establishment in Louisiana:
·	
	President or Vice President/Manager or Member (Registered agent if only registered office is changed)
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
	Notary
	S ACCEPTANCE AND ACKNOWLEDGEMENT OF APPOINTMENT pt my appointment as agent for the above named corporation/limited liability
	Agent
O	
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
_	
•	Notary

- 1. If a foreign corporation or limited liability company changes its registered office address, its registered agent, or the address of its principal business establishment in this state, a Statement of Change must be filed with the secretary of state. This form should be filed (in duplicate) with the Secretary of State's Office along with the \$25 filing fee.
- 2. If the only change made is the address of the registered office, this form need only be executed and acknowledged before a notary public by the registered agent.
- 3. If the registered agent is changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company, and the new agent must execute the Agent's Acceptance and Acknowledgment of Appointment.
- 4. If the principal business establishment address has changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager or member for a limited liability company.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STATEMENT OF CHANGE OF REGISTERED OFFICE, REGISTERED AGENT AND/OR PRINCIPAL BUSINESS ESTABLISHMENT IN LOUISIANA

(R.S. 12:308 & 12:1350)

Foreign Corporation/Foreign Limited Liability Company Enclose \$25 filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division
P. O. Box 94125
Baton Rouge, LA 70804-9125
Phone (225) 925-4704
www.sos.la.gov

STATE OF	
PARISH/COUNTY	
	below named corporation/limited liability company has changed its registered office, orincipal business establishment.
Company Name:	
Complete the following s	ections, where applicable:
New Registered Office a	ddress:
New Registered Agent a	nd address:
(agent's address must b	pe identical to registered office unless agent is a law partnership or an individual attorney)
New address of Principa	I Business Establishment in Louisiana:
·	
	President or Vice President/Manager or Member (Registered agent if only registered office is changed)
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
	Notary
	S ACCEPTANCE AND ACKNOWLEDGEMENT OF APPOINTMENT pt my appointment as agent for the above named corporation/limited liability
	Agent
O	
Sworn to and subscribed	I before me, the undersigned Notary Public, on this date:
_	
•	Notary

- 1. If a foreign corporation or limited liability company changes its registered office address, its registered agent, or the address of its principal business establishment in this state, a Statement of Change must be filed with the secretary of state. This form should be filed (in duplicate) with the Secretary of State's Office along with the \$25 filing fee.
- 2. If the only change made is the address of the registered office, this form need only be executed and acknowledged before a notary public by the registered agent.
- 3. If the registered agent is changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company, and the new agent must execute the Agent's Acceptance and Acknowledgment of Appointment.
- 4. If the principal business establishment address has changed, the statement must be executed and acknowledged before a notary public by the president or a vice president for a corporation; by a manager or member for a limited liability company.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



APPLICATION FOR WITHDRAWAL OF A FOREIGN CORPORATION/ LIMITED LIABILITY COMPANY FROM THE STATE OF LOUISIANA (R.S. 12:312 & 12:1351)

Enclose \$125 (Corporation) filing fee \$150 (Limited Liability Company) filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF
PARISH/COUNTY OF
Company Name
organized under the laws of the state/country of is no longer transacting business in
the State of Louisiana, effective surrenders its authority to transact business in the
state of Louisiana; revokes the authority of its registered agent to accept service of process, and consents that
service of process in any action or proceeding based on any cause of action arising out of or resulting from or
connected with any business transacted by it in this State during the time the company was authorized to transact
business in this State, be made on the company by service thereof on the Secretary of State, or on a person in his
office designated to receive service of process; such service, if made on the Secretary of State.
Service of Process address:
Officer/Manager or Member Date
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary

SS338 Rev. 01/24 (see instructions on back)

- 1. A foreign corporation or limited liability company authorized to transact business in this state may withdraw from this state upon procuring from the Secretary of State a Certificate of Withdrawal.
- 2. In order to obtain a Certificate of Withdrawal, this application must be executed in duplicate by any officer for a corporation, or by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company. The application must be acknowledged by the signing party before a notary public. (If the withdrawal is for a corporation which is in the hands of a receiver or a trustee, this form shall be executed on behalf of the corporation by such receiver or trustee and acknowledged by him.)
- 3. A Certificate of Withdrawal shall be issued when all fees, charges, taxes, unemployment compensation, distributions and interest have been paid as required by law and evidenced by certificates of the Collector of Revenue and the Administrator of the Division of Employment Security of the Department of Labor. (The Secretary of State's Office requests these certificates from the above offices.)
- 4. Upon the issuance of a Certificate of Withdrawal, the authority of the company to transact business in Louisiana shall cease.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
Business Name (List exactly as it ap	pears in documents)	
Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



APPLICATION FOR WITHDRAWAL OF A FOREIGN CORPORATION/ LIMITED LIABILITY COMPANY FROM THE STATE OF LOUISIANA (R.S. 12:312 & 12:1351)

Enclose \$125 (Corporation) filing fee \$150 (Limited Liability Company) filing fee Make remittance payable to Secretary of State Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF
PARISH/COUNTY OF
Company Name
organized under the laws of the state/country of is no longer transacting business in
the State of Louisiana, effective surrenders its authority to transact business in the
state of Louisiana; revokes the authority of its registered agent to accept service of process, and consents that
service of process in any action or proceeding based on any cause of action arising out of or resulting from or
connected with any business transacted by it in this State during the time the company was authorized to transact
business in this State, be made on the company by service thereof on the Secretary of State, or on a person in his
office designated to receive service of process; such service, if made on the Secretary of State.
Service of Process address:
Officer/Manager or Member Date
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary

SS338 Rev. 01/24 (see instructions on back)

- 1. A foreign corporation or limited liability company authorized to transact business in this state may withdraw from this state upon procuring from the Secretary of State a Certificate of Withdrawal.
- 2. In order to obtain a Certificate of Withdrawal, this application must be executed in duplicate by any officer for a corporation, or by a manager, if management of the limited liability company is vested in one or more managers, or a member, if management is reserved to the members, for a limited liability company. The application must be acknowledged by the signing party before a notary public. (If the withdrawal is for a corporation which is in the hands of a receiver or a trustee, this form shall be executed on behalf of the corporation by such receiver or trustee and acknowledged by him.)
- 3. A Certificate of Withdrawal shall be issued when all fees, charges, taxes, unemployment compensation, distributions and interest have been paid as required by law and evidenced by certificates of the Collector of Revenue and the Administrator of the Division of Employment Security of the Department of Labor. (The Secretary of State's Office requests these certificates from the above offices.)
- 4. Upon the issuance of a Certificate of Withdrawal, the authority of the company to transact business in Louisiana shall cease.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS346B Rev. 01/24

STATEMENT OF CHANGE OF MEMBERS AND/OR MANAGERS OF A FOREIGN LIMITED LIABILITY COMPANY

Foreign Limited Liability Company Enclose \$25 filing fee Make remittance payable to Secretary of State

Do Not Send Cash

Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

REMOV	/AL OF MEMBERS AND/OR MANAGERS
ce is hereby given that the above name indicated will be removed.	ed limited liability company authorized the removal of the following: Only
Name and Title	Name and Title
Name and Title	Name and Title
Name and Title	Name and Title
	To be signed by a member or manager Date ION OF MEMBERS AND/OR MANAGERS ed limited liability company has authorized the addition of the following: C
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ce is hereby given that the above name itles indicated will be added. Name and Title Name and Title	ION OF MEMBERS AND/OR MANAGERS ed limited liability company has authorized the addition of the following: Municipal Address Municipal Address

1.	This form is to be used when an existing foreign limited liability company changes the managers and/	or
	members.	

2.	The Statement	of Change	of Members	and/or]	Managers	must	be signed	by a	manager	or	membe	1
	authorized to si	gn on behalt	f of the compa	ny.								

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

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Check or Money Order Encl	osed		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
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Name and Title	Name and Title
Name and Title	Name and Title
Name and Title	Name and Title
	To be signed by a member or manager Date ION OF MEMBERS AND/OR MANAGERS ed limited liability company has authorized the addition of the following: C
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	authorized to si	gn on behalt	f of the compa	ny.								

STATE OF LOUISIANA SECRETARY OF STATE



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Address		
City	State	Zip Code
Daytime phone number	Fax number	Email address
documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



STATEMENT AND AFFIDAVIT OF REGISTRATION OF FOREIGN PARTNERSHIP

(R.S. 9:3422)

Foreign Partnership Enclose \$150 filing fee Make remittance payable to Secretary of State Do Not Send Cash Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

CHECK ONE: () Original Filing () Amendment () Conversion
Current Name of Partnership:
Previous Name of Partnership:
Organized under the laws of: State, County, Territory, Province or Commonwealth
Municipal address of principal place of business outside Louisiana:
Municipal address of principal place of business in Louisiana:
Name and municipal address of agent for service of process who must reside in Louisiana:
Names and municipal addresss of partners (at least one must be a general partner):
Does the partnership intend to own immovable property in Louisiana in the partnership name? () Yes ()
Are any of the partners to have limited liability recognized in Louisiana? () Yes () No
The Partnership's federal tax identification number:
Before me, undersigned Notary Public in and for personal
came and appearedwho after being duly sworn, did depose and that he is a general partner in the above named partnership, that the information stated herein is true and corr and that he has the authority to certify the information in this statement.
Signature of General Partner Notary Date

Pursuant to R.S. 9:3422 the articles of partnership/amendment shall not be filed with the registration statement. However, by registering the partnership, the partnership agrees to furnish a true copy of its articles of partnership to the secretary of state within 30 days of his written request.

- 1. In order to enjoy the rights, privileges and juridical status of a Louisiana partnership, and in order to own immovable property in this state or to have the limited liability of any partners of a limited partnership recognized, a foreign partnership must file a statement and affidavit of Registration with the secretary of state.
- This form can also be used to amend a foreign partnership's filing in this state, if the
 information contained in an original filing changes or was inaccurate when made.
 Until an (amended) registration form is filed, changes and amendments are not
 effective as to third persons.
- 3. Please call the Internal Revenue Service at (901) 546-3920 for information on how to obtain a Partnership's Federal Tax Identification number.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information
Routine Expedit	e \$30 Priority Expedite processing 2-4 hour processing	
Check or Money Order Enc	losed	
Oo not put credit card information	on this form. You may save payment ir	nformation in your geauxBIZ profile under master account
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Name of person filing document (evi	dence of filing will be mailed to this person, at	address below)
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City	State	Zip Code
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documents online th Rouge, Jefferson, La Tangipahoa and Teri NOTE: Louisiana Law requi bar roll number on t	fayette, Livingston, Orleans, Oua rebonne. Please visit our website res all Louisiana notaries to print he document.	sier, Caddo, Calcasieu, East Baton chita, Rapides, St. Tammany, at GeauxBiz.com. or type their name and notary or
_	Address: P. O. Box 94125, Bator Location: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809



STATEMENT AND AFFIDAVIT OF REGISTRATION OF FOREIGN PARTNERSHIP

(R.S. 9:3422)

Foreign Partnership Enclose \$150 filing fee Make remittance payable to Secretary of State Do Not Send Cash Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

CHECK ONE: () Original Filing () Amendment () Conversion
Current Name of Partnership:
Previous Name of Partnership:
Organized under the laws of: State, County, Territory, Province or Commonwealth
Municipal address of principal place of business outside Louisiana:
Municipal address of principal place of business in Louisiana:
Name and municipal address of agent for service of process who must reside in Louisiana:
Names and municipal addresss of partners (at least one must be a general partner):
Does the partnership intend to own immovable property in Louisiana in the partnership name? () Yes ()
Are any of the partners to have limited liability recognized in Louisiana? () Yes () No
The Partnership's federal tax identification number:
Before me, undersigned Notary Public in and for personal
came and appearedwho after being duly sworn, did depose and that he is a general partner in the above named partnership, that the information stated herein is true and corr and that he has the authority to certify the information in this statement.
Signature of General Partner Notary Date

Pursuant to R.S. 9:3422 the articles of partnership/amendment shall not be filed with the registration statement. However, by registering the partnership, the partnership agrees to furnish a true copy of its articles of partnership to the secretary of state within 30 days of his written request.

- 1. In order to enjoy the rights, privileges and juridical status of a Louisiana partnership, and in order to own immovable property in this state or to have the limited liability of any partners of a limited partnership recognized, a foreign partnership must file a statement and affidavit of Registration with the secretary of state.
- This form can also be used to amend a foreign partnership's filing in this state, if the
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STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

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Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



TERMINATION OF REGISTRATION

(R.S. 9:3427)

Foreign Partnership Enclose \$150 filing fee Make remittance payable to Secretary of State Do Not Send Cash Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State's Office is hereby notified that it is the intention of the following named Foreign Partnership to terminate its registration in the State of Louisiana.

Name of Foreign Partnership:	
Organized under the laws of: State, Country, Territory, Province or Commonwealth	
Municipal address of principal place of business outside Louisiana:	
Municipal address of principal place of business in Louisiana:	
The undersigned certifies that he/she is a partner of the above named partnership and that he/she has the authority to terminate said partnership registration.	
Partner Date	

SS394 Rev. 01/24 (see instructions on back)

1.	A duly registered foreign partnership may terminate its registration by written notification
	to the secretary of state by a person who certifies that he is a partner of the partnership
	and has the authority to terminate the registration.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



TERMINATION OF REGISTRATION

(R.S. 9:3427)

Foreign Partnership Enclose \$150 filing fee Make remittance payable to Secretary of State Do Not Send Cash Return to: Commercial Division P. O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

The Secretary of State's Office is hereby notified that it is the intention of the following named Foreign Partnership to terminate its registration in the State of Louisiana.

Name of Foreign Partnership:	
Organized under the laws of: State, Country, Territory, Province or Commonwealth	
Municipal address of principal place of business outside Louisiana:	
Municipal address of principal place of business in Louisiana:	
The undersigned certifies that he/she is a partner of the above named partnership and that he/she has the authority to terminate said partnership registration.	
Partner Date	

SS394 Rev. 01/24 (see instructions on back)

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	to the secretary of state by a person who certifies that he is a partner of the partnership
	and has the authority to terminate the registration.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



APPLICATION OF A REGISTERED LIMITED LIABILITY PARTNERSHIP

(R.S. 9:3432)

Enclose \$125 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

Phone (225) 925-4704 Web Site: www.sos.la.gov

CHECK ONE: () Original Filing () Renewal () Name Change	
Current Partnership Name:	
(The name must include the words "registered limited liability partnership" or the abbreviation "L.L.P." as the last word or letters in its	name.
Previous Partnership Name:	
Is the partnership's agreement on file with the Secretary of State's Office? () Yes () No	
Street address of principal office in Louisiana:	
Number of partners:	
Names and municipal addresses of partners (at least two):	
The partnership engages in the business specified below:	
Ву:	
Date	

SS975 Rev. 01/24 (see instructions on back)

- 1. The application must be executed by a majority in interest of the partners or by one or more partners authorized by a majority in interest of the partners.
- 2. Please submit two executed copies of the application.
- 3. A registration is effective for a term of one year from the date the application is filed with the secretary of state unless voluntarily withdrawn by filing a written withdrawal notice. A partnership may renew a registration by filing an application for renewal prior to the expiration of the term of registration.
- 4. If the application is properly completed and submitted with the correct filing fee, the secretary of state will file the application and send a letter acknowledging filing. If duplicate copies are submitted, the duplicate copy will be stamped "filed" and returned with the acknowledgement letter.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



APPLICATION OF A REGISTERED LIMITED LIABILITY PARTNERSHIP

(R.S. 9:3432)

Enclose \$125 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

Phone (225) 925-4704 Web Site: www.sos.la.gov

CHECK ONE: () Original Filing () Renewal () Name Change	
Current Partnership Name:	
(The name must include the words "registered limited liability partnership" or the abbreviation "L.L.P." as the last word or letters in its	name.
Previous Partnership Name:	
Is the partnership's agreement on file with the Secretary of State's Office? () Yes () No	
Street address of principal office in Louisiana:	
Number of partners:	
Names and municipal addresses of partners (at least two):	
The partnership engages in the business specified below:	
Ву:	
Date	

SS975 Rev. 01/24 (see instructions on back)

- 1. The application must be executed by a majority in interest of the partners or by one or more partners authorized by a majority in interest of the partners.
- 2. Please submit two executed copies of the application.
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- 4. If the application is properly completed and submitted with the correct filing fee, the secretary of state will file the application and send a letter acknowledging filing. If duplicate copies are submitted, the duplicate copy will be stamped "filed" and returned with the acknowledgement letter.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



APPLICATION TO REGISTER TRADE NAME TRADEMARK OR SERVICE MARK

(Pursuant to R.S. of 1950, Title 51, Chapter 1, Part VI as amended)

Enclose \$75 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

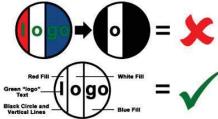
Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF		
PARISH/COUNTY OF		
	Check One:	() Trade Name () Trademark () Service Mark
	Check One:	() Original Filing () Renewal
1. Name of person(s), Corpor	ration, Limited Liability Compa	any or Partnership applying for registration:
2. If applicant is a corporation	n, list state of incorporation:	
3. Full street address and P.	O. Box address, city, state, a	nd zip of applicant:
		registered. If logo is included, please describe. If the spart of your registration, attach two copies of design.
5. Type of business or list of	goods or services to which th	e trade name, trademark or service mark is applied:
6. Enter class(es) in which tra (Class list on reverse side. There is a \$7	ademark or service mark is re 75 registration fee for each class number regi	· ·
7. Date trade name, tradema	rk or service mark first used b	by applicant
		Month, Day, Year
8. Date trade name, tradema	rk or service mark first used i	n Louisiana
person, firm, association, uni-	on or corporation has the righ any such resemblance theret	Month, Day, Year rk or service mark sought to be registered and no other at to such use in such class, either in the identical form to as may be calculated to deceive, and the facsimiles
Sworn to and subscribed befo	ore me, the undersigned Nota	ary Public, on this date:
The below named person sw in the foregoing application, a		or an authorized representative of the applicant, named aid application are true.
Notony Signature Drinted Name and	Noton/Por Poll Number	Applicant or Authorized Decrease the fire Competing and Title
Notary Signature, Printed Name and	inotally/Dal Roll inumber	Applicant or Authorized Representative Signature and Title

SS309 Rev. 01/25 (see instructions on back)

- 1. Trade Name a word or group of words, name, symbol, device or any combination thereof used by a person to identify his business, vocation or occupation and distinguish it from the business, vocation or occupation of others. Trademark any word, name, symbol, device or any combination thereof adopted and used by a person to identify goods, made or sold, and to distinguish them from goods made or sold by others. Service Mark a mark used in the sale or advertising of services to identify the services of one person and distinguish them from the services of others.
- 2. Fill in the full name of the individual(s), corporation, partnership or limited liability company who is the owner of the trade name, trademark or service mark being registered.
- 3. Give full municipal and mailing address of the person(s) listed in No. 2.
- 4. List the trade name, trademark or service mark exactly as you intend to use it in your business. If a logo is included, please describe.
 - NOTE: Our System stores logo registration documents in black-and-white only. Registrations submitted with full-color or grayscale logo graphics will be rejected. You must provide a black-and-white PDF of the logo with supporting text that sufficiently describes the unique elements of the logo.



- 5. Describe the type of business, such as "restaurant" or "retail grocery store" etc. If you are registering a trademark or service mark, list goods or services to which the name is applied, such as "cosmetics", "baker goods", "fishing equipment", etc.
- 6. No. 6 applies only to trademarks and service marks. Write the class number(s) under item 6. Check the list of classes set out below which describe the category of goods (trademarks only) or services (service marks only) being registered. If goods or services are registered in more than one class, you must pay a registration fee of \$75 for each class registered.
- 7. List the month, day and year when you first started using the trade name, trademark or service mark in business.
- 8. List the month, day and year when you first started using the trade name, trademark or service mark in Louisiana. The trade name, trademark or service mark must actually be in use on the date of this application. If you have not started actual use of the trade name, trademark or service mark, you can reserve the trade name, trademark or service mark for 120 days by sending a letter and \$25 fee to the Secretary of State asking that it be reserved.
- 9. The affidavit must be notarized. Show the name of the applicant, the name of the person authorized to make the application and his title. The application must be signed by the applicant or the designated authorized representative.
- NOTE: The certificate of registration shall be issued if the Secretary of State finds that the trade name is distinguishable from or not the same as a trade name, limited liability company name, or corporate name already in use in this state, or that the trademark or service mark is distinguishable from or not the same as a trademark or service mark already in use in this state which is registered in the same class.

The said classes are as follows:

A. Goods (Trade Marks)

- Chemicals
- 2. Paints
- 3. Cosmetics & cleaning preparations
- 4. Lubricants & fuels
- 5. Pharmaceuticals
- 6. Metal goods
- 7. Machinery
- 8. Hand tools
- 9. Electrical & scientific apparatus
- 10. Medical apparatus
- 11. Environmental control apparatus
- 12. Vehicles
- 13. Firearms
- 14. Jewelry
- 15. Musical instruments

- 16. Paper goods & printed matter
- 17. Rubber goods
- 18. Leather goods
- 19. Nonmetallic building materials
- 20. Furniture & articles not otherwise classified
- 21. House wares & glass
- 22. Cordage & fibers
- 23. Yarns & threads
- 24. Fabrics
- 25. Clothing
- 26. Fancy goods
- 27. Floor coverings
- 28. Toys & sporting goods
- 29. Meats & processed foods
- 30. Staple foods

- 31. Natural agricultural products
- 32. Light beverages
- 33. Wines and spirits
- 34. Smokers' articles
- 35. Miscellaneous
- B. Services (Service Marks)
- 36. Insurance & financial
- 37. Construction & repair38. Communication
- 39. Transportation & storage
- 40. Material treatment
- 41. Education & entertainment
- 42. Miscellaneous
- 43. Advertising and business

STATE OF LOUISIANA SECRETARY OF STATE



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Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



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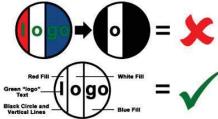
Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

STATE OF		
PARISH/COUNTY OF		
	Check One:	() Trade Name () Trademark () Service Mark
	Check One:	() Original Filing () Renewal
1. Name of person(s), Corpor	ration, Limited Liability Compa	any or Partnership applying for registration:
2. If applicant is a corporation	n, list state of incorporation:	
3. Full street address and P.	O. Box address, city, state, a	nd zip of applicant:
		registered. If logo is included, please describe. If the spart of your registration, attach two copies of design.
5. Type of business or list of	goods or services to which th	e trade name, trademark or service mark is applied:
6. Enter class(es) in which tra (Class list on reverse side. There is a \$7	ademark or service mark is re 75 registration fee for each class number regi	· ·
7. Date trade name, tradema	rk or service mark first used b	by applicant
		Month, Day, Year
8. Date trade name, tradema	rk or service mark first used i	n Louisiana
person, firm, association, uni-	on or corporation has the righ any such resemblance theret	Month, Day, Year rk or service mark sought to be registered and no other at to such use in such class, either in the identical form to as may be calculated to deceive, and the facsimiles
Sworn to and subscribed befo	ore me, the undersigned Nota	ary Public, on this date:
The below named person sw in the foregoing application, a		or an authorized representative of the applicant, named aid application are true.
Notony Signature Drinted Name and	Noton/Por Poll Number	Applicant or Authorized Decrease the fire Competing and Title
Notary Signature, Printed Name and	inotally/Dal Roll inumber	Applicant or Authorized Representative Signature and Title

SS309 Rev. 01/25 (see instructions on back)

- 1. Trade Name a word or group of words, name, symbol, device or any combination thereof used by a person to identify his business, vocation or occupation and distinguish it from the business, vocation or occupation of others. Trademark any word, name, symbol, device or any combination thereof adopted and used by a person to identify goods, made or sold, and to distinguish them from goods made or sold by others. Service Mark a mark used in the sale or advertising of services to identify the services of one person and distinguish them from the services of others.
- 2. Fill in the full name of the individual(s), corporation, partnership or limited liability company who is the owner of the trade name, trademark or service mark being registered.
- 3. Give full municipal and mailing address of the person(s) listed in No. 2.
- 4. List the trade name, trademark or service mark exactly as you intend to use it in your business. If a logo is included, please describe.
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- 7. List the month, day and year when you first started using the trade name, trademark or service mark in business.
- 8. List the month, day and year when you first started using the trade name, trademark or service mark in Louisiana. The trade name, trademark or service mark must actually be in use on the date of this application. If you have not started actual use of the trade name, trademark or service mark, you can reserve the trade name, trademark or service mark for 120 days by sending a letter and \$25 fee to the Secretary of State asking that it be reserved.
- 9. The affidavit must be notarized. Show the name of the applicant, the name of the person authorized to make the application and his title. The application must be signed by the applicant or the designated authorized representative.
- NOTE: The certificate of registration shall be issued if the Secretary of State finds that the trade name is distinguishable from or not the same as a trade name, limited liability company name, or corporate name already in use in this state, or that the trademark or service mark is distinguishable from or not the same as a trademark or service mark already in use in this state which is registered in the same class.

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- 7. Machinery
- 8. Hand tools
- 9. Electrical & scientific apparatus
- 10. Medical apparatus
- 11. Environmental control apparatus
- 12. Vehicles
- 13. Firearms
- 14. Jewelry
- 15. Musical instruments

- 16. Paper goods & printed matter
- 17. Rubber goods
- 18. Leather goods
- 19. Nonmetallic building materials
- 20. Furniture & articles not otherwise classified
- 21. House wares & glass
- 22. Cordage & fibers
- 23. Yarns & threads
- 24. Fabrics
- 25. Clothing
- 26. Fancy goods
- 27. Floor coverings
- 28. Toys & sporting goods
- 29. Meats & processed foods
- 30. Staple foods

- 31. Natural agricultural products
- 32. Light beverages
- 33. Wines and spirits
- 34. Smokers' articles
- 35. Miscellaneous
- B. Services (Service Marks)
- 36. Insurance & financial
- 37. Construction & repair38. Communication
- 39. Transportation & storage
- 40. Material treatment
- 41. Education & entertainment
- 42. Miscellaneous
- 43. Advertising and business

STATE OF LOUISIANA SECRETARY OF STATE



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Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



APPLICATION FOR RESERVATION OF TRADE NAME TRADEMARK OR SERVICE MARK

(R.S. 51:213)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

(check the appropriate box)	(\$25 fee for e			
	()	Trade Name		
	()	Trademark	(class no(s).	
	()	Service Mark	(class no(s).)
Name:				
Said trade name or mark is requ	ested to be re	served on behalf	of	
or a period of 120 days from the	date of your	receipt of this and	dication	
or a period of 120 days from the	e date of your	receipt of this app	olication.	
or a period of 120 days from the	e date of your	receipt of this app	olication.	
or a period of 120 days from the	e date of your	receipt of this app		
or a period of 120 days from the	e date of your			
or a period of 120 days from the	e date of your			
or a period of 120 days from the	e date of your	Name		
or a period of 120 days from the	e date of your	Name	ss	
or a period of 120 days from the	e date of your	Name		
or a period of 120 days from the	e date of your	Name Addre	ss	
or a period of 120 days from the	e date of your	Name Addre	ss tate/Zip	
or a period of 120 days from the	e date of your	Name Addre	ss tate/Zip	
or a period of 120 days from the	e date of your	Name Addre City/S Area o	tate/Zip code/phone number	
or a period of 120 days from the	e date of your	Name Addre City/S Area o	ss tate/Zip	

SS396 Rev. 01/24 (see instructions on back)

- 1. Trade names, trademarks and service marks can be reserved for 120 days by filing an Application for Reservation of Trade Name, Trademark or Service Mark and the requisite filing fee of \$25 with the secretary of state.
- 2. The availability of a trade name can be preliminarily checked by calling the Secretary of State's Office; however, telephone trade name searches are preliminary checks only and should not be relied upon.
- 3. A trade name, trademark or service mark cannot deceptively or falsely suggest that the organization so denoted is of a charitable or nonprofit nature when the organization is in fact of a profit making nature.
- 4. Filing an Application for Name Reservation does not formally adopt the Trade Name, Trademark or Service Mark.

A. Goods

1.	Chemicals		24.	Fabrics
2.	Paints		25.	Clothing
3.	Cosmetics & cleaning preparations		26.	Fancy goods
4.	Lubricants & fuels		27.	Floor coverings
5.	Pharmaceuticals		28.	Toys & sporting goods
6.	Metal goods		29.	Meats & processed foods
7.	Machinery		30.	Staple foods
8.	Hand tools		31.	Natural agricultural products
9.	Electrical & scientific apparatus		32.	Light beverages
10.	Medical apparatus		33.	Wines & spirits
11.	Environmental control apparatus		34.	Smokers' articles
12.	Vehicles		35.	Miscellaneous
13.	Firearms	В.	Services	
14.	Jewelry		36.	Insurance & financial
15.	Musical instruments		37.	Construction & repair
16.	Paper goods & printed matter		38.	Communication
17.	Rubber goods		39.	Transportation & storage
18.	Leather goods			
19.	Non-metallic building materials		40.	Material treatment
20.	Furniture & articles not otherwise classified		41.	Education & entertainment
21.	Housewares & glass		42.	Miscellaneous
22.	Cordage & fibers		43.	Advertising & business
23.	Yarns & threads			

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

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Address			
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Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



APPLICATION FOR RESERVATION OF TRADE NAME TRADEMARK OR SERVICE MARK

(R.S. 51:213)

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(225) 925-4704 www.sos.la.gov

(check the appropriate box)	(\$25 fee for e			
	()	Trade Name		
	()	Trademark	(class no(s).	
	()	Service Mark	(class no(s).)
Name:				
Said trade name or mark is requ	ested to be re	served on behalf	of	
or a period of 120 days from the	date of your	receipt of this and	dication	
or a period of 120 days from the	e date of your	receipt of this app	olication.	
or a period of 120 days from the	e date of your	receipt of this app	olication.	
or a period of 120 days from the	e date of your	receipt of this app		
or a period of 120 days from the	e date of your			
or a period of 120 days from the	e date of your			
or a period of 120 days from the	e date of your	Name		
or a period of 120 days from the	e date of your	Name	ss	
or a period of 120 days from the	e date of your	Name		
or a period of 120 days from the	e date of your	Name Addre	ss	
or a period of 120 days from the	e date of your	Name Addre	ss tate/Zip	
or a period of 120 days from the	e date of your	Name Addre	ss tate/Zip	
or a period of 120 days from the	e date of your	Name Addre City/S Area o	tate/Zip code/phone number	
or a period of 120 days from the	e date of your	Name Addre City/S Area o	ss tate/Zip	

SS396 Rev. 01/24 (see instructions on back)

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12.	Vehicles		35.	Miscellaneous
13.	Firearms	В.	Services	
14.	Jewelry		36.	Insurance & financial
15.	Musical instruments		37.	Construction & repair
16.	Paper goods & printed matter		38.	Communication
17.	Rubber goods		39.	Transportation & storage
18.	Leather goods			
19.	Non-metallic building materials		40.	Material treatment
20.	Furniture & articles not otherwise classified		41.	Education & entertainment
21.	Housewares & glass		42.	Miscellaneous
22.	Cordage & fibers		43.	Advertising & business
23.	Yarns & threads			

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Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
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ASSIGNMENT OF TRADE NAME, TRADEMARK OR SERVICE MARK

(R.S. 51:217)

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Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

Name of registrant/assignor:			
Address:			
2. Check applicable box(es) of name	or mark being assigned:		
()Trade Name	() Trademark	() Service Mark	
3. Class Number(s):			
4. Name and/or description of name of	or mark:		
5. Date of Registration with the secret	ary of state:		
6. Name of assignee, and state of inco	orporation if assignee is a c	orporation:	
Address:			
Assignor also transfers to Assignee the use of or symbolized by the Trade			nected with
	_	Assignor and Title	Date

SS397 Rev. 01/25 (see instructions on back)

Instructions

- 1. The current registrant of a tradename, trademark or service mark can assign same by completing and signing this form.
- 2. Upon filing of an assignment, the secretary of state shall issue to the Assignee a new certificate of registration for the remainder of the term of the registration or of the last renewal thereof.
- 3. If registration of a mark is in more than one class, a filing fee of \$75 for each class is required.

STATE OF LOUISIANA SECRETARY OF STATE



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Address			
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Name of registrant/assignor:			
Address:			
2. Check applicable box(es) of name	or mark being assigned:		
()Trade Name	() Trademark	() Service Mark	
3. Class Number(s):			
4. Name and/or description of name of	or mark:		
5. Date of Registration with the secret	ary of state:		
6. Name of assignee, and state of inco	orporation if assignee is a c	orporation:	
Address:			
Assignor also transfers to Assignee the use of or symbolized by the Trade			nected with
	_	Assignor and Title	Date

SS397 Rev. 01/25 (see instructions on back)

Instructions

- 1. The current registrant of a tradename, trademark or service mark can assign same by completing and signing this form.
- 2. Upon filing of an assignment, the secretary of state shall issue to the Assignee a new certificate of registration for the remainder of the term of the registration or of the last renewal thereof.
- 3. If registration of a mark is in more than one class, a filing fee of \$75 for each class is required.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
· · · · · · · · · · · · · · · · · · ·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809	



SS I-1 01/24

COLLECTION AGENCY/DEBT COLLECTOR REGISTRATION FORM

(Pursuant to R.S. 9:3534.1 B)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

() Original Filing	() Amendmen	t () Name Change
The full legal name of the colle	ction agency or debt c	ollector is
Previous name of the collection	n agency or debt collec	ctor is
Jurisdiction of organization if o	collector is a company	
Address where legal process	may be served	
Name of employer if collector i	s an individual	
		Signature of Authorized Representative
INSTRUCTIONS		Date
	COE filing for with the	Secretary of State's Office.

2. You will receive a copy marked "Received and Filed" by the secretary of state.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
· · · · · · · · · · · · · · · · · · ·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809	



SS I-1 01/24

COLLECTION AGENCY/DEBT COLLECTOR REGISTRATION FORM

(Pursuant to R.S. 9:3534.1 B)

Enclose \$25 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

() Original Filing	() Amendmen	t () Name Change
The full legal name of the colle	ction agency or debt c	ollector is
Previous name of the collection	n agency or debt collec	ctor is
Jurisdiction of organization if o	collector is a company	
Address where legal process	may be served	
Name of employer if collector i	s an individual	
		Signature of Authorized Representative
INSTRUCTIONS		Date
	COE filing for with the	Secretary of State's Office.

2. You will receive a copy marked "Received and Filed" by the secretary of state.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
· · · · · · · · · · · · · · · · · · ·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809	



APPLICATION FOR A STATE CABLE & VIDEO FRANCHISE

(La. R.S. 45:1361)

Enclose \$60 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

	Company/	Applicant Name
organized under the	laws of the state of	, county/parish of
		less than \$1 million either through a policy of public
liability insurance or t	through self-insurance. The applic	ant agrees to comply with all applicable federal and
state laws and regula	ations.	
Street address of prir	ncipal place of business:	
Names of the principa	al executive officers:	
•	and/or parishes to be served:	
•	and/or parishes to be served: ached for additional municipalities/parishe	
(An addendum may be att	ached for additional municipalities/parishe	
(An addendum may be att	-	es.)
(An addendum may be att	ached for additional municipalities/parishe	es.)

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



APPLICATION FOR A STATE CABLE & VIDEO FRANCHISE

(La. R.S. 45:1361)

Enclose \$60 filing fee
Make remittance payable to
Secretary of State
Do Not Send Cash

Return to: Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125

(225) 925-4704 www.sos.la.gov

	Company/	/Applicant Name	
organized under the la	ws of the state of	, county/parish of	
		less than \$1 million either through a policy of public	
liability insurance or th	rough self-insurance. The applic	cant agrees to comply with all applicable federal and	d
state laws and regulat	ions.		
Street address of princ	ipal place of business:		
Names of the principal	executive officers:		
-	nd/or parishes to be served:		
-	nd/or parishes to be served: ched for additional municipalities/parishe		
An addendum may be attad	ched for additional municipalities/parishe		
An addendum may be attad	-	es.)	
(An addendum may be attace (An addendum may be attace attace) To be signed by an	ched for additional municipalities/parished	es.)	

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS3143 Rev. 01/24

HOME SERVICE CONTRACT PROVIDER APPLICATION

R.S. 51:3143

Enclose filing fee \$600 Initial Registration \$250 Renewal Registration Make remittance payable to Secretary of State Do Not Send Cash Return to:

Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

STATE OF			() Initial Registration
PARISH/COUNTY OF _			() Renewal Registration
			() Amended Registration
			()
	HOME SERVICE CO	ONTRACT PROVIDER'S INFORMA	ATION:
Applicant Name:	As vacista	red with Louisiana Secretary of State	
	As register	ea wan Louisana Secretary of State	
Address:	Dringi	pal Office in state of organization	
		ude City, State and Zip Code)	
Mailing Address:			
	(Incl	ude City, State and Zip Code)	
Telephone Number:		Alternate Telephone Number:	
	(Include Area Code)		(Include Area Code)
	CONTAC	T PERSON'S INFORMATION:	
	CONTAC	TTERSON SINFORMATION.	
Name:			
Address:	(Incl	ude City, State and Zip Code)	
Talanhana Numbari		Alternate Telephone Number:	
Telephone Number.	(Include Area Code)	Anternate Telephone Number	(Include Area Code)
	REGISTER	RED AGENT'S INFORMATION:	
Name:			
Address:			·····
	(Incl	ude City, State and Zip Code)	

OFFICERS, DIRECTORS AND OWNERS

Provide the names and addresses of all officers, directors and owners of 10 percent or more of the business, as required by R.S. 51:3143B. Provide an addendum if additional space is needed.

1.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
2.	Nama	
۷.		
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
3.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
	N	
4.	name:	
	Address:	(Include City, State and Zip Code)
	Position	Ownership Percentage:
	Toshion.	Ownership referringer.
5.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
_		
6.	Name:	
	Address:	(Include City, State and Zip Code)
	Position	
	i osiuon.	Ownership Percentage:
7.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:

Signature of Applicant or Authorized Representative:
Printed Name of Applicant or Authorized Representative:
On this day of 20 , before me, personally appeared ,
On this day of 20, before me, personally appeared, to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printed Name, and Notary/Bar Roll Number
AGENT'S ACKNOWLEDGMENT AND ACCEPTANCE OF APPOINTMENT
I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above named entity.
Registered agent(s) signature(s):
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary Signature, Printed Name, and Notary/Bar Roll Number
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SS3143 Rev. 01/24

- 1. The initial registration form must be completely filled out and submitted to the Secretary of State's Office along with a copy of its organizational documents (Articles of Incorporation, Articles of Organization, Articles of Association, Partnership Agreement), a surety bond issued by a company licensed to do business in Louisiana in the amount of \$50,000 and the filing fee of \$600.
- 2. The provider must be registered with the Louisiana Secretary of State's Office and must be in good standing.
- 3. The registration is effective for two years. The renewal application must be submitted to the Secretary of State's Office, along with a surety bond issued by a company licensed to do business in Louisiana in the amount of \$50,000, 90 days prior to the expiration of the registration. The renewal registration fee is \$250.
- 4. Changes to the registration form can be made by filing an amended registration, accompanied by supporting documentation (amendments to the Articles of Incorporation, Articles of Organization, Articles of Association or Partnership Agreement), with the Secretary of State's Office within 60 days of the effective date of the change. If the amendment is not due to any changes to the organizational documents, a statement to the fact can be submitted. There is no fee to amend the registration.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS3143 Rev. 01/24

HOME SERVICE CONTRACT PROVIDER APPLICATION

R.S. 51:3143

Enclose filing fee \$600 Initial Registration \$250 Renewal Registration Make remittance payable to Secretary of State Do Not Send Cash Return to:

Commercial Division P.O. Box 94125 Baton Rouge, LA 70804-9125 (225) 925-4704 www.sos.la.gov

STATE OF			() Initial Registration
PARISH/COUNTY OF _			() Renewal Registration
			() Amended Registration
			()
	HOME SERVICE CO	ONTRACT PROVIDER'S INFORMA	ATION:
Applicant Name:	As vacista	red with Louisiana Secretary of State	
	As register	ea wan Louisana Secretary of State	
Address:	Dringi	pal Office in state of organization	
		ude City, State and Zip Code)	
Mailing Address:			
	(Incl	ude City, State and Zip Code)	
Telephone Number:		Alternate Telephone Number:	
	(Include Area Code)		(Include Area Code)
	CONTAC	T PERSON'S INFORMATION:	
	CONTAC	TTERSON SINFORMATION.	
Name:			
Address:	(Incl	ude City, State and Zip Code)	
Talanhana Numbari		Alternate Telephone Number:	
Telephone Number.	(Include Area Code)	Anternate Telephone Number	(Include Area Code)
	REGISTER	RED AGENT'S INFORMATION:	
Name:			
Address:			·····
	(Incl	ude City, State and Zip Code)	

OFFICERS, DIRECTORS AND OWNERS

Provide the names and addresses of all officers, directors and owners of 10 percent or more of the business, as required by R.S. 51:3143B. Provide an addendum if additional space is needed.

1.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
2.	Nama	
۷.		
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
3.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
	N	
4.	name:	
	Address:	(Include City, State and Zip Code)
	Position	Ownership Percentage:
	Toshion.	Ownership referringer.
5.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
_		
6.	Name:	
	Address:	(Include City, State and Zip Code)
	Position	
	i osiuon.	Ownership Percentage:
7.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:

Signature of Applicant or Authorized Representative:
Printed Name of Applicant or Authorized Representative:
On this day of 20 , before me, personally appeared ,
On this day of 20, before me, personally appeared, to me known to be the person described in and who executed the foregoing instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printed Name, and Notary/Bar Roll Number
AGENT'S ACKNOWLEDGMENT AND ACCEPTANCE OF APPOINTMENT
I hereby acknowledge and accept the appointment of registered agent for and on behalf of the above named entity.
Registered agent(s) signature(s):
Sworn to and subscribed before me, the undersigned Notary Public, on this date:
Notary Signature, Printed Name, and Notary/Bar Roll Number
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SS3143 Rev. 01/24

- 1. The initial registration form must be completely filled out and submitted to the Secretary of State's Office along with a copy of its organizational documents (Articles of Incorporation, Articles of Organization, Articles of Association, Partnership Agreement), a surety bond issued by a company licensed to do business in Louisiana in the amount of \$50,000 and the filing fee of \$600.
- 2. The provider must be registered with the Louisiana Secretary of State's Office and must be in good standing.
- 3. The registration is effective for two years. The renewal application must be submitted to the Secretary of State's Office, along with a surety bond issued by a company licensed to do business in Louisiana in the amount of \$50,000, 90 days prior to the expiration of the registration. The renewal registration fee is \$250.
- 4. Changes to the registration form can be made by filing an amended registration, accompanied by supporting documentation (amendments to the Articles of Incorporation, Articles of Organization, Articles of Association or Partnership Agreement), with the Secretary of State's Office within 60 days of the effective date of the change. If the amendment is not due to any changes to the organizational documents, a statement to the fact can be submitted. There is no fee to amend the registration.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS3163 Rev. 01/24

MOTOR VEHICLE SERVICE CONTRACT PROVIDER APPLICATION

R.S. 51:3163

Enclose Filing Fee \$600 Initial Registration \$250 Renewal Registration Make remittance payable to Secretary of State Do Not Send Cash Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

STATE OF	() Initial Registration
PARISH/COUNTY OF	() Renewal Registration
	() Amended Registration
	MOTOR VEHICLE SERVICE CONTRACT PROVIDER'S INFORMATION:
Applicant Name:	
	As registered with Louisiana Secretary of State
Address:	
	Principal Office in state of organization (Include City, State and Zip Code)
Mailing Address:	
	(Include City, State and Zip Code)
	CONTACT PERSON'S INFORMATION:
N	
Name:	
Address:	
	(Include City, State and Zip Code)
	REGISTERED AGENT'S INFORMATION:
	ALGORIAN SERVICION
Name:	
Address:	
	(Include City, State and Zip Code)

OFFICERS, DIRECTORS AND OWNERS

Provide the names and addresses of all officers, directors and owners of 10% or more of the business, as required by R.S. 51:3163(B). Provide an addendum if additional space is needed.

1.	Name:		
	Address:	(Include City, State and Zip Code)	
	Position		
	Position:	Ownership references.	
2.	Name:		
	Address:		
		(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
3.			
	Address:	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
4.	Name:		
	Address:		
		(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
5.			
	Address:	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
6.	Name:		
	Address:		
	70. 144	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
7	Nama		
7.	Name:		
	Address:	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	

Signature of Applicant or Authorized Representative:	
Printed Name of Applicant or Authorized Representatives	:
On this day of	20 . before me, personally appeared
to me known to be the person described in and who executed the fo	20, before me, personally appeared, regoing instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printe	ed Name, and Notary/Bar Roll Number
AGENT'S ACKNOWLEDGMEN	T AND ACCEPTANCE OF APPOINTMENT
I hereby acknowledge and accept the appointmen	t of registered agent for and on behalf of the above named entity.
	Registered agent(s) signature(s):
	Registered ageni(s) signature(s):
	
Sworn to and subscribed before me, the undersigned Notary Public,	on this date:
Notary Signature Printe	ed Name, and Notary/Bar Roll Number
routy Signature, Frince	at valle, and rotally but from rotalises

SS3163 Rev. 01/24

- 1. The initial registration form must be completely filled out and submitted to the Secretary of State's office along with a copy of its organizational documents (Articles of Incorporation, Articles of Organization, Articles of Association, Partnership Agreement), a reimbursement insurance policy issued by a company licensed to do business in Louisiana, and the filing fee of \$600.
- 2. The provider must be registered with the Louisiana Secretary of State's office and must be in good standing.
- 3. The registration is effective for two years. The renewal application must be submitted to the Secretary of State's office, along with the reimbursement insurance policy, ninety days prior to the expiration of the registration. The renewal registration fee is \$250.
- 4. Changes to the registration form can be made by filing an amended registration, accompanied by supporting documentation (amendments to the Articles of Incorporation, Articles of Organization, Articles of Association or Partnership Agreement), with the Secretary of State's office within 60 days of the effective date of the change. If the amendment is not due to any changes to the organizational documents, a statement to the fact can be submitted. There is no fee to amend the registration.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



SS3163 Rev. 01/24

MOTOR VEHICLE SERVICE CONTRACT PROVIDER APPLICATION

R.S. 51:3163

Enclose Filing Fee \$600 Initial Registration \$250 Renewal Registration Make remittance payable to Secretary of State Do Not Send Cash Return to:

Commercial Division P.O. Box 94125

Baton Rouge, LA 70804-9125 Phone: (225) 925-4704 Web Site: www.sos.la.gov

STATE OF	() Initial Registration
PARISH/COUNTY OF	() Renewal Registration
	() Amended Registration
	MOTOR VEHICLE SERVICE CONTRACT PROVIDER'S INFORMATION:
Applicant Name:	
	As registered with Louisiana Secretary of State
Address:	
	Principal Office in state of organization (Include City, State and Zip Code)
Mailing Address:	
	(Include City, State and Zip Code)
	CONTACT PERSON'S INFORMATION:
N	
Name:	
Address:	
	(Include City, State and Zip Code)
	REGISTERED AGENT'S INFORMATION:
	ALGORIAN SERVICION
Name:	
Address:	
	(Include City, State and Zip Code)

OFFICERS, DIRECTORS AND OWNERS

Provide the names and addresses of all officers, directors and owners of 10% or more of the business, as required by R.S. 51:3163(B). Provide an addendum if additional space is needed.

1.	Name:		
	Address:	(Include City, State and Zip Code)	
	Position		
	Position:	Ownership references.	
2.	Name:		
	Address:		
		(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
3.			
	Address:	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
4.	Name:		
	Address:		
		(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
5.			
	Address:	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
6.	Name:		
	Address:		
	70. 144	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	
7	Nama		
7.	Name:		
	Address:	(Include City, State and Zip Code)	
	Position:	Ownership Percentage:	

Signature of Applicant or Authorized Representative:	
Printed Name of Applicant or Authorized Representatives	:
On this day of	20 . before me, personally appeared
to me known to be the person described in and who executed the fo	20, before me, personally appeared, regoing instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printe	ed Name, and Notary/Bar Roll Number
AGENT'S ACKNOWLEDGMEN	T AND ACCEPTANCE OF APPOINTMENT
I hereby acknowledge and accept the appointmen	t of registered agent for and on behalf of the above named entity.
	Registered agent(s) signature(s):
	Registered ageni(s) signature(s):
	
Sworn to and subscribed before me, the undersigned Notary Public,	on this date:
Notary Signature Printe	ed Name, and Notary/Bar Roll Number
routy Signature, Frince	at valle, and rotally but from rotalises

SS3163 Rev. 01/24

- 1. The initial registration form must be completely filled out and submitted to the Secretary of State's office along with a copy of its organizational documents (Articles of Incorporation, Articles of Organization, Articles of Association, Partnership Agreement), a reimbursement insurance policy issued by a company licensed to do business in Louisiana, and the filing fee of \$600.
- 2. The provider must be registered with the Louisiana Secretary of State's office and must be in good standing.
- 3. The registration is effective for two years. The renewal application must be submitted to the Secretary of State's office, along with the reimbursement insurance policy, ninety days prior to the expiration of the registration. The renewal registration fee is \$250.
- 4. Changes to the registration form can be made by filing an amended registration, accompanied by supporting documentation (amendments to the Articles of Incorporation, Articles of Organization, Articles of Association or Partnership Agreement), with the Secretary of State's office within 60 days of the effective date of the change. If the amendment is not due to any changes to the organizational documents, a statement to the fact can be submitted. There is no fee to amend the registration.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STRUCTURED SETTLEMENT PURCHASE COMPANY REGISTRATION

R.S. 9:2713.2

Enclose Filing Fee \$600 Initial Registration \$250 Renewal Registration Make remittance payable to Secretary of State Do Not Send Cash Return to:

Phone:

Website:

Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125 (225) 925-4704

www.sos.la.gov www.geauxbiz.com

STATE OF	() Initial Registration
PARISH/COUNTY OF	() Renewal Registration
	() Amended Registration
N. CA. II	. ,
Name of Appli	cant
Applicant Previous Name (in c	ase of name change)
located at	
Domicile Address of (Include City, State an	
has secured a surety bond, has been issued a letter of cred thousand dollars, relative to its business as a structured set bond, letter of credit, or cash bond is intended to protect p purchase company. The applicant will comply with all of the Protection Act when acting as a structured settlement purchase proceedings in this state. If the applicant is an entity, please provide the name and additional contents of the contents	tlement purchase company in this state. The surety bayees who do business with a structured settlement the provisions of the Louisiana Structured Settlement asse company and filing structured settlement transfer
Contact Person's Name and Address (Inc	clude City, State, and Zip Code)
Signature of Applicant (authorized representative if applicant is a company)	Title (Authorized Representative for Company)
On this day of 20, before me, per to me known to be the person described in and who executed the forego free act and deed.	sonally appeared, ing instrument, and acknowledged that he executed it as his
Notary Signature, Printed Name, an	d Notary/Bar Roll Number
SS2713 Rev. 01/24	

- 1. The initial registration form must be completed and submitted to the Secretary of State's office along with a surety bond, letter of credit, or cash bond (effective for the life of the registration) in the amount of \$50,000 and the filing fee of \$600.
- 2. The full name and physical (street) address of the applicant must be provided. A post office address only is not sufficient.
- 3. If the applicant is an entity, a contact person's name and address must be provided.
- 4. The registration form must be signed by the applicant and notarized. If the applicant is an entity, the registration form must be signed by an authorized representative of the entity.
- 5. The registration is renewable annually. The renewal application must be submitted to the Secretary of State's office, along with a surety bond, letter of credit, or cash bond (effective for the life of the registration) in the amount of \$50,000 prior to the expiration of the registration. The renewal registration fee is \$250.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



STRUCTURED SETTLEMENT PURCHASE COMPANY REGISTRATION

R.S. 9:2713.2

Enclose Filing Fee \$600 Initial Registration \$250 Renewal Registration Make remittance payable to Secretary of State Do Not Send Cash Return to:

Phone:

Website:

Commercial Division

P.O. Box 94125

Baton Rouge, LA 70804-9125 (225) 925-4704

www.sos.la.gov www.geauxbiz.com

STATE OF	() Initial Registration
PARISH/COUNTY OF	() Renewal Registration
	() Amended Registration
N. CA. II	. ,
Name of Appli	cant
Applicant Previous Name (in c	ase of name change)
located at	
Domicile Address of (Include City, State an	
has secured a surety bond, has been issued a letter of cred thousand dollars, relative to its business as a structured set bond, letter of credit, or cash bond is intended to protect p purchase company. The applicant will comply with all of the Protection Act when acting as a structured settlement purchase proceedings in this state. If the applicant is an entity, please provide the name and additional contents of the contents	tlement purchase company in this state. The surety bayees who do business with a structured settlement the provisions of the Louisiana Structured Settlement asse company and filing structured settlement transfer
Contact Person's Name and Address (Inc	clude City, State, and Zip Code)
Signature of Applicant (authorized representative if applicant is a company)	Title (Authorized Representative for Company)
On this day of 20, before me, per to me known to be the person described in and who executed the forego free act and deed.	sonally appeared, ing instrument, and acknowledged that he executed it as his
Notary Signature, Printed Name, an	d Notary/Bar Roll Number
SS2713 Rev. 01/24	

- 1. The initial registration form must be completed and submitted to the Secretary of State's office along with a surety bond, letter of credit, or cash bond (effective for the life of the registration) in the amount of \$50,000 and the filing fee of \$600.
- 2. The full name and physical (street) address of the applicant must be provided. A post office address only is not sufficient.
- 3. If the applicant is an entity, a contact person's name and address must be provided.
- 4. The registration form must be signed by the applicant and notarized. If the applicant is an entity, the registration form must be signed by an authorized representative of the entity.
- 5. The registration is renewable annually. The renewal application must be submitted to the Secretary of State's office, along with a surety bond, letter of credit, or cash bond (effective for the life of the registration) in the amount of \$50,000 prior to the expiration of the registration. The renewal registration fee is \$250.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact information	
Routine Expedite	Priority Expedite rocessing 2-4 hour processing		
Check or Money Order Encl	osed		
*Do not put credit card information	on this form. You may save payment in	nformation in your geauxBIZ profile under master acco	ount.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, a	t address below)	
Address			
City	State	Zip Code	
Daytime phone number	Fax number	Email address	
documents online the Rouge, Jefferson, La	• • • • • • • • • • • • • • • • • • • •		
•	•	or type their name and notary or	
bar roll number on t	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www	aton Rouge, LA * 70809	



MANAGED SERVICE/MANAGED SECURITY SERVICE PROVIDERS

R.S. 51:2113

() Managed Service Provider

() Managed Security Service Provider

Return to:

Commercial Division

Phone: (225) 925-4704

Baton Rouge, LA 70804-9125

P.O. Box 94125

PARY OF		Web Site: www.sos.la.gov
STATE OF) Initial Registration
PARISH/COUNTY OF) Renewal Registration
	() Amended Registration
MA	ANAGED SERVICE/MANAGED SECURITY PROVID	DER'S INFORMATION:
Applicant Name:	As registered with Louisiana Secretary of S	tate
Address:		
	Principal Office in state of organization (Include City, State and Zip Code)	
Mailing Address:		
·	(Include City, State and Zip Code)	
Phone Number: ()	Alternate Phone Num	ber: ()
	CONTACT PERSON'S INFORMATI	ON:
Name:		
Address:	(Include City, State and Zip Code)	
	(
Phone Number: ()	Alternate Phone Num	ber: ()
	REGISTERED AGENT'S INFORMAT	NON-
	REGISTERED AGENT STATEMENT	
Name:		
Address:	(Include City, State and Zip Code)	
SS2113 Rev. 01/24		

OFFICERS, DIRECTORS AND OWNERS

Provide the names and addresses of all officers, directors and owners of 10% or more of the business, as required by R.S. 51:2113(B). Provide an addendum if additional space is needed.

1.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
2.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
3.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
4.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
5.	Name:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
6.	Nama	
0.		
	Addicss.	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
7.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
SS2113 Re		Ownership Percentage:

Signature of Applicant or Authorized Representative:	
Printed Name of Applicant or Authorized Representative:	
On this day of 20	o, before me, personally appeared, going instrument, and acknowledged that he executed it as his free act and deed.
to me known to be the person described in and who executed the fore	going instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printed	Name, and Notary/Bar Roll Number
,	
ACENT'S ACKNOWI EDGMENT	AND ACCEPTANCE OF APPOINTMENT
AGENT S ACKNOWLEDGMENT	AND ACCEL TANCE OF ALL OINTMENT
I hereby acknowledge and accept the appointment of	of registered agent for and on behalf of the above named entity.
	Registered agent(s) signature(s):
Sworn to and subscribed before me, the undersigned Notary Public, o	on this date:
Notary Signature, Printed	Name, and Notary/Bar Roll Number

SS2113 Rev. 01/24

- "<u>Managed Service Provider</u>" means an individual, partnership, corporation, incorporated or unincorporated association, joint stock company, reciprocal, syndicated, or any similar entity or combination of entities that manages a public body's information technology infrastructure or end-user systems. The term shall not include any entity providing communications services subject to regulation or oversight by the Louisiana Public Service Commission or the Federal Communications Commission.
 - "Managed Security Service Provider" means an individual, partnership, corporation, incorporated or unincorporated association, joint stock company, reciprocal, syndicated, or any similar entity or combination of entities that provides a managed security service for a public body.
- 2. The initial registration form must be completely filled out and submitted to the Secretary of State's office along with a copy of its organizational documents (Articles of Incorporation, Articles of Organization, Articles of Association, Partnership Agreement).
- 3. The provider must be registered with the Louisiana Secretary of State's office and must be in good standing.
- 4. The registration is effective for two years. The renewal application must be submitted to the Secretary of State's office at least ninety days prior to the expiration of the registration.
- 5. Changes to the registration form can be made by filing an amended registration, accompanied by supporting documentation (amendments to the Articles of Incorporation, Articles of Organization, Articles of Association or Partnership Agreement), with the Secretary of State's office within 60 days of the effective date of the change.

STATE OF LOUISIANA SECRETARY OF STATE



Commercial Division (225) 925-4704

<u>Fax Numbers</u> (225) 932-5314 Corporations (225) 932-5317 Legal Services (225) 932-5318 UCC

TRANSMITTAL INFORMATION For All Business Filings

Please indicate below	the level of service request	ed, payment and contact informatior	1
Routine Expedite			
Check or Money Order Encl	osed		
*Do not put credit card information of	on this form. You may save payment ir	nformation in your geauxBIZ profile under master ac	count.
Business Name (List exactly as it ap	pears in documents)		
Name of person filing document (evic	ence of filing will be mailed to this person, at	address below)	-
			_
Address			
City	State	Zip Code	-
Daytime phone number	Fax number	Email address	-
documents online the Rouge, Jefferson, La			
·	•	or type their name and notary or	
bar roll number on the	ne document.		
•	ddress: P. O. Box 94125, Bator ocation: 8585 Archives Ave., B Web Site Address: www.	aton Rouge, LA * 70809	



MANAGED SERVICE/MANAGED SECURITY SERVICE PROVIDERS

R.S. 51:2113

() Managed Service Provider

() Managed Security Service Provider

Return to:

Commercial Division

Phone: (225) 925-4704

Baton Rouge, LA 70804-9125

P.O. Box 94125

PARY OF		Web Site: www.sos.la.gov
	J	
STATE OF) Initial Registration
PARISH/COUNTY OF) Renewal Registration
	() Amended Registration
MA	ANAGED SERVICE/MANAGED SECURITY PROVID	PER'S INFORMATION:
Applicant Name:	As registered with Louisiana Secretary of S	tate
Address:		
	Principal Office in state of organization (Include City, State and Zip Code)	
Mailing Address:		
·	(Include City, State and Zip Code)	
Phone Number: ()	Alternate Phone Num	ber: ()
	CONTACT PERSON'S INFORMATI	ON:
Name:		
Address:	(Include City, State and Zip Code)	
	(,,,	
Phone Number: ()	Alternate Phone Num	ber: ()
	REGISTERED AGENT'S INFORMAT	TION:
	REGISTERED AGENT STATEMENT	
Name:		
Address:	(Include City, State and Zip Code)	
SS2113 Rev. 01/24		

OFFICERS, DIRECTORS AND OWNERS

Provide the names and addresses of all officers, directors and owners of 10% or more of the business, as required by R.S. 51:2113(B). Provide an addendum if additional space is needed.

1.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
2.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
3.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
4.	Name:	
	Address:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
5.	Name:	
		(Include City, State and Zip Code)
	Position:	Ownership Percentage:
6.	Nama	
0.		
	Addicss.	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
7.	Name:	
	Address:	(Include City, State and Zip Code)
	Position:	Ownership Percentage:
SS2113 Re		Ownership Percentage:

Signature of Applicant or Authorized Representative:	
Printed Name of Applicant or Authorized Representative:	
On this day of 20	o, before me, personally appeared, going instrument, and acknowledged that he executed it as his free act and deed.
to me known to be the person described in and who executed the fore	going instrument, and acknowledged that he executed it as his free act and deed.
Notary Signature, Printed	Name, and Notary/Bar Roll Number
,	
ACENT'S ACKNOWI EDGMENT	AND ACCEPTANCE OF APPOINTMENT
AGENT S ACKNOWLEDGMENT	AND ACCEL TANCE OF ALL OINTMENT
I hereby acknowledge and accept the appointment of	of registered agent for and on behalf of the above named entity.
	Registered agent(s) signature(s):
Sworn to and subscribed before me, the undersigned Notary Public, o	on this date:
Notary Signature, Printed	Name, and Notary/Bar Roll Number

SS2113 Rev. 01/24

- "<u>Managed Service Provider</u>" means an individual, partnership, corporation, incorporated or unincorporated association, joint stock company, reciprocal, syndicated, or any similar entity or combination of entities that manages a public body's information technology infrastructure or end-user systems. The term shall not include any entity providing communications services subject to regulation or oversight by the Louisiana Public Service Commission or the Federal Communications Commission.
 - "Managed Security Service Provider" means an individual, partnership, corporation, incorporated or unincorporated association, joint stock company, reciprocal, syndicated, or any similar entity or combination of entities that provides a managed security service for a public body.
- 2. The initial registration form must be completely filled out and submitted to the Secretary of State's office along with a copy of its organizational documents (Articles of Incorporation, Articles of Organization, Articles of Association, Partnership Agreement).
- 3. The provider must be registered with the Louisiana Secretary of State's office and must be in good standing.
- 4. The registration is effective for two years. The renewal application must be submitted to the Secretary of State's office at least ninety days prior to the expiration of the registration.
- 5. Changes to the registration form can be made by filing an amended registration, accompanied by supporting documentation (amendments to the Articles of Incorporation, Articles of Organization, Articles of Association or Partnership Agreement), with the Secretary of State's office within 60 days of the effective date of the change.