# FIGURE 18

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### FLORIDA DEPARTMENT OF STATE Division of Corporations

March 9, 2016

CATHERINE E MARTINEZ 9191 SIEGEN LANE STE 5B BATON ROUGE, LA 70810

SUBJECT: THE RABALAIS LAW FIRM A PROFESSIONAL CORPORATION,

CO

Ref. Number: F16000000478

We have received your document for THE RABALAIS LAW FIRM A PROFESSIONAL CORPORATION, CO. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The above entity is a Florida corporation and the document and fee submitted are for a Florida limited liability company. The correct form is enclosed and an additional filing fee of \$5.00 is due.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 316A00004920

### **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: THE RABALAIS LAW FIRM A PROFESSIONAL CORPORATION, CO.

Name of Corporation

DOCUMENT NUMBER: F1600000478

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

## CATHERINE E. MARTINEZ

Name of Contact Person

RABALAIS LAW

Firm/Company

9191 SIEGEN LANE, SUITE 5B

Address

BATON ROUGE, LA 70816

City/State and Zip Code

# CATHERINE@RABALAISLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CATHERINE E. MARTINEZ ... 225

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

RECEIVED
6 MR 24 PH 12: 12
PER 24 PH 12: 12
PER 25 PER 24 PH 12: 12

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

**Street Address:** 

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statutes n organized under the laws of the State of LOUISI registered agent, or both, in the State of Florida.	ANA
	0 0	S LAW FIRM A PROFESSIONAL CORPO	
2. The principal	office address: 9191 SIEGEN	N LANE, SUITE 5B, BATON ROUG	E, LA 70816
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 02/01/20	016 Document number: F16000000	478
	I street address of the current regis tment of State: (If resigned, enter	stered agent and registered office on file with the resigned)	
	TIFFANY HENSON		
	10199 SOUTHSIDE BLY	VD., SUITE 101	
	JACKSONVILLE, FLOR	IDA 32256	16 t
6. The name and (if changed):	I street address of the new register	ed agent (if changed) and /or registered office	MAR 24 PM CRETARY OF LAHASSEE F
	10199 SOUTHSIDE BLY	VD., SUITE 105	PH 12: 4:
P.O. Box. NOT acceptable		<b>3</b> 7	
	JACKSONVILLE, FLOR	IDA 32256	
The street addre	ess of its registered office and the be identical.	street address of the business office of its regist	ered agent,
Such change wa authorized by th	s authorized by resolution duly a ne board, or the corporation has b	dopted by its board of directors or by an officer een notified in writing of the change.	so
Rec	RU	PAUL A. RABALAIS, SR. DIRECTOR	
I hereby accept I further agree to performance of agent. Or, if the	o comply with the provisions of a my duties, and I am familiar with	Printed or typed name and title tent and agree to act in this capacity. Ill statutes relative to the proper and complete and accept the obligation of my position as reg to reflect a change in the registered office addre tifted in writing of this change.	istered ess, I
differy	hature of Registered Agent	3/19/16	
If signing on be	half of an entity:	Date	
	vped or Printed Name		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

\* \* \* FILING FEE: \$35.00 \* \* \*