

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000001912

**Entity Name:** H.B. RENTALS, L.C., L.L.C.

**Current Principal Place of Business:**

5813 HIGHWAY 90 EAST  
BROUSSARD, LA 70518

**Current Mailing Address:**

C/O LEGAL DEPARTMENT  
1001 LOUISIANA STREET, SUITE 2900  
HOUSTON, TX 77002 US

**FEI Number:** 72-1307291

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title            PRESIDENT  
Name            TOUPS, DEIDRE  
Address        1001 LOUISIANA STREET, SUITE 2900  
City-State-Zip: HOUSTON TX 77002

Title            VP, TREASURER, DIRECTOR  
Name            TAYLOR, ROBERT S  
Address        1001 LOUISIANA STREET, SUITE 2900  
City-State-Zip: HOUSTON TX 77002

Title            SECRETARY  
Name            NOLAN, PORTER H  
Address        1001 LOUISIANA STREET, SUITE 2900  
City-State-Zip: HOUSTON TX 77002

Title            ASST. SECRETARY  
Name            HILLEGONDS, JENNIFER J  
Address        1001 LOUISIANA STREET, SUITE 2900  
City-State-Zip: HOUSTON TX 77002

Title            DIRECTOR  
Name            DUNLAP, DAVID D  
Address        1001 LOUISIANA STREET, SUITE 2900  
City-State-Zip: HOUSTON TX 77002

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JENNIFER J. HILLEGONDS

**ASSISTANT SECRETARY    04/20/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date