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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: HARRY L AVANT

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# F08000004007

Entity Name: SMITH OPERATING AND MANAGEMENT CO.

Current Principal Place of Business:

400 TEXAS STREET SUITE 927 SHREVEPORT, LA 71101

Current Mailing Address:

PO BOX 52 SHREVEPORT, LA 71161 52

FEI Number: 72-0982455

Name and Address of Current Registered Agent:

BYRANT, BRADLEY 300 FIFTH AVE. SOUTH NAPLES, FL 34102 US

2 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

Officer/Director Detail :

Title	PD	Title	ST
Name	AVANT, HARRY L	Name	WALTERS, DEBBIE
Address	400 TEXAS STREET, SUITE 927	Address	400 TEXAS STREET, SUITE 927
City-State-Zip:	SHREVEPORT LA 71101	City-State-Zip:	SHREVEPORT LA 71101

FILED May 01, 2016 Secretary of State CC5843972049

Date

Certificate of Status Desired: No

05/01/2016

Date