F96000000386

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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SECRETARY OF SIME

T. LEMIEUX

January 15, 2013

VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Briggs Management, Inc.

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

1. One original (1) and one (1) copy of Change of Registered Agent/Address form;

2. \$35 \$25 LLC to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

Adam Saldaña

REGISTERED AGENT SOLUTIONS, INC.

Registered Agent Solutions, Inc.

1701 Directors Blvd. Ste. 300

Austin, TX 78744

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

Pursuant to the provisions of sections 607.0302, 617.0302, 607.1308, or 617.1308, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Louisiana in order to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: BRIGGS MANAGEMENT, INC. 2. The principal office address: 641 PAPWORTH AVE METAIRIE LA 70005	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 01/23/1996 Document number: F9600000386	
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)	
C T CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND ROAD	
PLANTATION FL 33324 US	wang mg
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	
Registered Agent Solutions, Inc.	
155 Office Plaza Dr. Suite A	
P.O. Box NOT acceptable Tallahassee, FL 32301	
The street address of its registered office and the street address of the business office of its registered as changed will be identical.	gent,
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
Signature of an officer of director TRANS L. BR 1665 Printed or typed name and title	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	<i>d</i>
Signature of Registered Agent 11281 r.3 Date	
If signing on behalf of an entity:	
Art Flores, Asst. Secretary	
Typed or Printed Name	

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

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

statement of cha	provisions of sections 607.0502, 617.0502 ange is submitted for a corporation organi r to change its registered office or registe	ized under the laws of the State o	of Louisiana
1. The name of t	the corporation: BRIGGS MANAGE	EMENT, INC.	
2. The principal	office address: 641 PAPWORTH A	AVE METAIRIE LA 700	05
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 01/23/1996	Document number: F960	000000386
	d street address of the current registered agreement of State: (If resigned, enter resigned		with the
	C T CORPORATION SYSTE	M	
	1200 SOUTH PINE ISLAND I	ROAD	
	PLANTATION FL 33324 US		
6. The name and (if changed):	d street address of the new registered agen	nt (if changed) and /or registered	13 FEB -4
	Registered Agent Solutions, I	nc.	
	155 Office Plaza Dr. Suite A		S & C
	P.O. Box NOT Tallahassee, FL 32301	acceptable	を (2)
The street address changed will	ess of its registered office and the street a	address of the business office o	f its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted he board, or the corporation has been not	by its board of directors or by tified in writing of the change.	an officer so
Signatu	ure of an officer of director	TRANS C. BAILOS PR. Printed or typed name and	ES d title
I hereby accept I further agree performance of agent. Or, if th hereby confirm	t the appointment as registered agent and to comply with the provisions of all statu my duties, and I am familiar with and a sis document is being filed merely to reflect that the corporation has been notified in	d agree to act in this capacity. ites relative to the proper and c ccept the obligation of my posit ect a change in the registered o n writing of this change.	complete tion as registered ffice address, I
St.	gnature of Registered Agent	1128113 Date	
If signing on be	ehalf of an entity:		
Art Flores,	Asst. Secretary		
T	yped or Printed Name		

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