2001 UNIFORM	BUSINESS	REPORT	(UBR)
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DOCUMENT # L0000008989 1. Entity Name LOUISIANA, L.L.C.			FILED							
LOUISIAN	NA, L.L.O.		•			•				
Principal Plac	rincipal Place of Business Mailing Address				01 FEB 22 PM 4: 48					
220 W GREEN		220 W GREENWAY BLVD.				SECRETAR	Y OF STAT	Œ		
FALLSCHURG	H VA 22046	FALLSCHURCH VA 22046			SECRETARY OF STATE TALLAHASSEE.FLORIDA					
					İ					
2. Principal F	Place of Business	3. Mailing Address	- H. A		ſ					
3000 - 12 NW 25th Ave. 3000 - 12 NW 25 Suite, Apt. #, etc. Suite, Apt. #, etc.		2514 A	ve		DO NOT V	RITE IN THIS SF	DACE			
										_
	City & State POMPANO BEACH FL POMPANO BEACH, FL				4. FEI Number Applied For Not Applied For Not Applied For					-
Zip 33		^{zi} 33069	Country			icate of Status Desire		5.00 Add		1
	6. Name and Address of Current R					and Address of New	<u>' F</u>	ee Require	ed	-
		ogisterou Agont	Name	е			V Tregretered Ag			-
ACCOUNT	TING AFFORDABLE, INC.		Stree	Street Address (P.O. Box Number is Not Acceptable) 3000-(2 NW JST Ave						-
	EST COMMERCIAL BLVD.	•	30	<u>)∞-(2_/</u>	NW 2	15th Ave				$\frac{1}{2}$
FORT LAU	JDERDALE FL 33309		City					Zin Cod	<u> </u>	┤
<u> </u>	$-\alpha$			City POTPANO BEACH FL Zingson 69						-
8. The above	named entity submits this statement for	the purpose of changing its re	gistered office	e or registered	agent, c	or both, in the State of	Florida.			
SIGNATURE .	Strature, typed or printed seme of registered agent and	DANIEL CA		anature required wh			Feb 15,	رصح	<u> </u>	
	agrissions, typed on primary than to registered agent and				eri remstatir	97	DATE			1
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11. I hereby c	ertify that the information supplied with the	nis filing does not qualify for th	e exemption s	tated in Section	on 119.0	7(3)(i), Florida Statute	s. I further certify	that the ir	nformation	
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 of truetee empowered to execute this report as required by Chapter 608, Florida Statutes.										
	(Xail //	and continue	2 Day 5 4				-			
SIGNATURE: SIGNATURE AND TYPED ON PRINTED HAME OF SIGNING MANAGER, OR AUTHORIZED REPRESENTATIVE Date Date Destrict Proper of De										