

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M01000002047

Entity Name: DBL PROPERTIES, L.L.C.

FILED
Oct 05, 2006
Secretary of State

Current Principal Place of Business:

511 GRAVIER ST., STE 100
NEW ORLEANS, LA 70130

Current Mailing Address:

511 GRAVIER ST., STE 100
NEW ORLEANS, LA 70130

New Principal Place of Business:

511 GRAVIER ST.
SUITE 100
NEW ORLEANS, LA 70130

New Mailing Address:

511 GRAVIER ST.
SUITE 100
NEW ORLEANS, LA 70130

FEI Number: 72-1318483

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, JAMES S
3 WEST GARDEN STREET
PENSACOLA, FL 327562950 US

Name and Address of New Registered Agent:

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: JAMES S. CAMPBELL

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BOSSETTA, PATRICK R
Address: 511 GRAVIER ST., STE 100
City-St-Zip: NEW ORLEANS, LA

Title: MGRM () Delete
Name: DORSEY, MARC G
Address: 511 GRAVIER ST., STE 100
City-St-Zip: NEW ORLEANS, LA

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BOSSETTA, PATRICK R
Address: 511 GRAVIER ST., STE 100
City-St-Zip: NEW ORLEANS, LA 70130

Title: MGRM (X) Change () Addition
Name: DORSEY, MARC G
Address: 511 GRAVIER ST., STE 100
City-St-Zip: NEW ORLEANS, LA 70130

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: MARC G. DORSEY

MGRM

10/05/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date