Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H16000056622 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number: FCA000000023 Phone : (850)205-8842 Fax Number : (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:

Foreign Limited Liability Company H. B. Rentals, L.C., L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

MAR 0 7 2016

3 MASON

COVER LETTER

TO:		ation Section n of Corporation	ıs				
SUBJE		B. Routals, L.C.,	L.L.C.				
			Name of I	Name of Limited Liability Company			
The enc Existence	co, and cl	pplication by For seck are submitte	eign Limited Liability Comp d to register the above refere	any for Authoriza noed foreign limi	tion to Tra ted liability	nsact Business in Florida, company to transact busi	" Certificate of ness in Florida
Picase r	eturn all	correspondence c	oncerning this matter to the	following:		•	
		Jennifer Hillego	onds				
	Name of Person						-
	Superior Energy Services, Inc.						
Firm/Company 1001 Louisiana Street, Suite 2900 Address					-		
					<u>.</u>		
		Houston, Texas 77002					_
			City/St	ate and Zip Code			_
		jennifor hillegono	is@superiorenergy.com				
	E-mail address: (to be used for future annual report notification)						
For furti	her infor	nation concerning	this matter, please call:				
	Jennife	r Hillegonds		713 at (654-22	34 ·	_
		Name o	f Contact Person	Arsa Code	Day	time Telephone Number	_
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registrati Clifton B 2661 Exc	ADDRESS: of Corporations on Section utilding cutive Center Circle se, FL 32301			
Enclosed		ck for the follow .00 Filing Fee	ing amount: \$130.00 Filing Fee & Certificate of Status	\$155.00 Filin	ig Foc &	S160.00 Piling Peo, Coof Status & Certified Co	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE POLLOWING IS SUBMITTED TO REGISTER A POREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: H.B. Rentals, L.C., L.L.C. (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "L.L.C." (If name unavailable, enter atternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.I.C," or "LLC.") Louisiana (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) upon registration (Date first transacted business in Florida, if prior to registration.)
(See sections 605,0904 & 605,0905, F.S. to determine penalty liability) 5813 Highway 90 Bast, Broussard, Louisiana 70518 (Street Address of Principal Office) 6. c/o Legal Department, 1001 Louisiana Street, Suite 2900, Houston, Texas 77002 (Mailing Address) 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) C T Corporation System Name: 1200 South Pine Island Road Office Address: Plantation. Plorida (City) Registered agent's acceptance: Having been named as registered agent and to accept terrice of process for the above stated limited liability company at the place designated in this application, I hereby accept the appaintment as registered agent and agree to act in this capacity. I further agree to complywith the provisions of all statutes relative to the proper and complete perforgince of my duties, and I am familiar with and accept the obligations of my position as registered agent.

C T Corporation System Jayna Nickeli By: 8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are; Asst. Secretary
See attached See attached. 9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having outpody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under cath of the trenslator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree fellows as provided for in a.817.155, P.S.

Robert S. Taylor, Vice President and Treasures

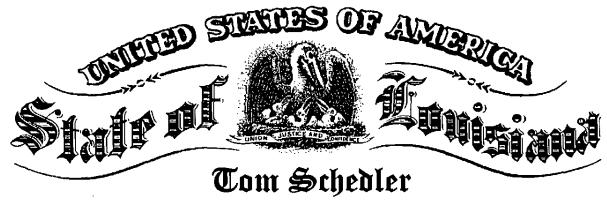
Typed or printed name of signso

Signature of un authorized person

H.B. Rentale, L.O. Officer & Director Listing

MAMIL Debtre Toupe Robert S. Teylor Parter H. Nolen Jenniter J. Hilbegande	TITLE Provident Vice President and Tressurer Becretary Assistant Secretary	ADDRESS 1001 Louisians Street, Suite 2900, Houston, TX 77002 1001 Louisians Street, Suite 2000, Houston, TX 77002 1001 Louisians Street, Suite 2000, Houston, TX 77002 1001 Louisians Street, Suite 2000, Houston, TX 77002
DIRECTORS David D. Duniap Robert S. Taylor	Otrector Director	1001 Louisiane Street, Suite 2000, Housian, TX 77002 1001 Louisians Street, Suite 2000, Housian, TX 77002

2016 M.A - U A & 15



SECRETARY OF STATE

As Secretary of State, of the State of Louisiana, I do hereby Certify that

H.B. RENTALS, L.C.

A limited liability company domiciled in BATON ROUGE, LOUISIANA,

Filed charter and qualified to do business in this State on October 05, 1995,

I further certify that the records of this Office indicate the company has paid all fees due the Secretary of State, and so far as the Office of the Secretary of State is concerned, is in good standing and is authorized to do business in this State.

I further certify that this certificate is not intended to reflect the financial condition of this company since this information is not available from the records of this Office.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

Secretary of State

March 2, 2016

Certificate ID: 10687006#YBR93

To validate this certificate, visit the following web site, go to Business Services, Search for Louisiana Business Filings, Validate a Certificate, then follow the instructions displayed.

www.sos.la.gov

Web 34507392K