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July -

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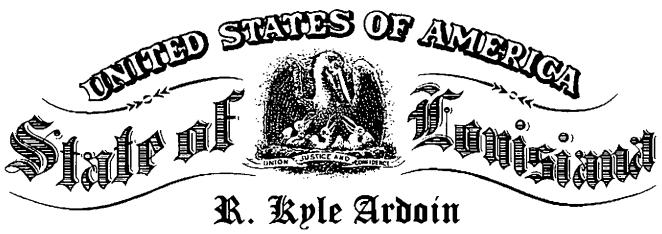
TO:

TO:	Registration Section Division of Corporation	s						
SUBJE	Susan Howard, LLC							
001731			of Limited Liability	Company		•		
					ansact Business in Florida,' ly company to transact busin			
Please	return all correspondence c	oncerning this matter to t	he following:					
	Richard J. Roth	, 111						
			Name of Person					
	Roth Law Firm	LLC						
		Firm/Company						
	2727 Prytania S	2727 Prytania Street. Suite 14						
			Address	•		•		
	New Orleans, L	A 70130						
	<u> </u>	City	y/State and Zip Code			•		
	rroth@rothtaxlaw	v.com						
		E-mail address: (to be u	ised for future annua	l report no	tification)	•		
For fur	ther information concerning	g this matter, please call:						
	Richard J. Roth, III		504 at (525-77	792			
	Name o	f Contact Person	Area Code	Da;	ytime Telephone Number			
	MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			Division Registra Clifton E 2661 Ex	T ADDRESS: of Corporations tion Section Building ecutive Center Circle see, FL 32301			
Enclose	ed is a check for the follow ☐ \$125.00 Filing Fee	ing amount: ■ \$130.00 Filing Fee & Certificate of Status	c □ \$155.00 Filit Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, C of Status & Certified Cop			

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	name adopted for the purpose of transacting business in F		ality Company," "L.L.C," or "L.L.C.")
Louisiana Secretary of		3. 83-2398880	
(Jurisdiction under the law of w	trich foreign limited limbility company is organized)	(FE) much	er, if applicable)
·	(Date first transacted business in Florida, if prior to (See acctions 605,0904 & 605,0905, F.S. to desert	o registration.)	
839 Wilshire Bouleva	•	6 2727 Prytania Street, Suite	14
(Street Address of		(Mailing Add	
Metairie, LA 70005		New Orleans, LA 70130	
			78
N 1 11	ere ii ii ii oo o		EC 19.
. Name and street addres	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)	JAN JAN
Name:	CAPITOL CORPORATE SERVICE	S, INC.	- 25章 デ ーカ。
	SIG PACT DADIV AMERICAND EX		
Office Address:	515 EAST PARK AVENUE 2ND FL	<u>,</u>	HO - 8
	TALLAHASSEE	, Florida 32301	<u> </u>
	(City)	(7.ip code	92 5
egistered agent's accep	tonce:		
signated in this applica comply with the provisi	raince. It is gistered agent and to accept service of the prope of the p	as registered agent and agree to act	in this capacity. I further agree
rsignated in this applica comply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment of ions of all statutes relative to the prope s of my position as registered agent.	as registered agent and agree to act	in this capacity. I further agree luties, and I am familiar with
esignated in this applicate comply with the provisi	gistered agent and to accept service of tion, I hereby accept the appointment t ions of all statutes relative to the prope	as registered agent and agree to act or and complete performance of my a	in this capacity. I further agree luties, and I am familiar with
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esignated in this applicate comply with the provising accept the obligation. The name, title or caps	gistered agent and to accept service of tion, I hereby accept the appointment of tions of all statutes relative to the propers of my position as registered agent. (Registered agent) actity and address of the person(s) who harme and Address:	Delanie Case, asst	in this capacity. I further agree luties, and I am familiar with SEC
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rsignated in this applicate comply with the provision accept the obligation. The name, title or caps Title or Capacity: Manager Attached is a certificate risdiction under the law of the translator must be sufficient in the sufficient or capacity:	gistered agent and to accept service of tion, I hereby accept the appointment of lons of all statutes relative to the prope is of my position as registered agent. LULANUE CASE (Registered agent) acity and address of the person(s) who harme and Address: Susan Howard 839 Wilshire Boulevard Metairie, LA 70005 sary) of existence, no more than 90 days old, of which it is organized. (If the certifical abmitted) uted in accordance with section 605.020	Delanie Case, asst Delani	In this capacity. I further agree futies, and I am familiar with SEC Name and Address: ving custody of records in the on of the certificate under oath that any false information
rsignated in this applicate comply with the provision accept the obligation. The name, title or caps Title or Capacity: Manager Attached is a certificate risdiction under the law of the translator must be sufficient in the sufficient or capacity:	gistered agent and to accept service of tion, I hereby accept the appointment of tions of all statutes relative to the propers of my position as registered agent. Case Case	Delanie Case, asst Delani	In this capacity. I further agree futies, and I am familiar with SEC Name and Address: ving custody of records in the on of the certificate under oath that any false information



SECRETARY OF STATE

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

SUSAN HOWARD, LLC

A limited liability company domiciled in METAIRIE, LOUISIANA,

Filed charter and qualified to do business in this State on November 07, 2018,

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,

December 17, 2018

L 12 le Nove Secretary of State Certificate ID: 11023947#ESL73
To validate this certificate, visit the

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 43248107K