File on subjec	or before	May 1, 1999 or 00.00 LATE FEE	Limited	l Liabilit	y Com	pany will b	e			
LIMITE	TY COMPANY SEPORT 9	LORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS			(14/1) (14/1) (17/1) (14/1) (14/1) (14/1)					
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE							<u> </u>	16 188	16. 314	2 8
\$ 188 1. Name	and Mailing Ad	dress DOCI	1							
SOLOCO, L.L.C. 3850 NORTH CAUSEWAY BLVD., SUITE 1770 METAIRIE LA 70002							1a. Principal Place of Business Address 3850 NORTH CAUSEWAY BLVD., S METAIRIE LA 70002			
2 Principal Place of Business 2a. Mailir				ng Address			3. Date Organize	ate Organized or Qualified 3a. State of For		of Formation
Suite, Apt. #, etc. Suite,			Suite, Ap	pt. #, etc.			04/04/1			
			05.00	0.1.				4. FEI Number Applied For		
City & State			City & Sta	City & State			72-1286	\L_ not applicat		Not Applicable
Zip	Country		Zip Countr			У	5. Date of Last Report 03/02/1998			onal Fee Required
7. Name and Address of Current Registere			Registered	I Agent		8.	Name and Address of New Reg		stered AgenVOffice	
1.200 S. PINE ISLAND ROAD PLANTATION FL 33324 9. Pursuant to the provisions of Sections 608 416 and 608.508, Florida Statut its registered office or registered agent, or both, in the State of Florida Such char as registered agent, and accept the obligations. SIGNATURE						Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc -02/26/9901072017 *****188.75 City Zip Code Logical Code Logi				
		(Registered Agent Accepting)	DTE Registered A			9 ¹		, State and Zip Code		
MGR MGR MGR MGR MGR	GR LATIOLAIS, RONALD GR COLE, JAMES D GR BALLANTINE, WM. THOMAS GR HARDEY, MATTHEW W			Business Street Address 3850 N. CAUSEWAY, 3850 N. CAUSEWAY, 3850 NORTH CAUSEWA 3850 NORTH CAUSEWA 3850 NORTH CAUSEWA			SUITE 17 AY BLVD.,	7 METAIRIE LA 7 METAIRIE LA , METAIRIE LA , METAIRIE LA		p Code
11. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (i). Florida Statutes. If urther certify that the information indicated on this annual 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 or trustee gopowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.										
SIGNATURE: 2-18-19 Go y 88822.										

INHSE10 R (12-98)