

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # M98000000328

1. Entity Name
ESL INVESTMENTS, L.L.C.



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DEC 12 AM 9:18

Principal Place of Business
6222 KATHY LANE
SHREVEPORT, LA 71105

Mailing Address
THE KINGSLEY PLACE
7110 UNIVERSITY DR APT 212
SHREVEPORT, LA 71105

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
6305 Querves Dr

Suite, Apt. #, etc.
6305 Querves Dr.

11052006 REIN-LLC CR2E101 (11/05)

City & State
Shreveport LA.

City & State
Shreveport, LA.

4. FEI Number
72-1400743

Applied For
Not Applicable

Zip
71106

Country
USA

Zip
71106

Country
USA

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BUSH, LAWRENCE P
150 N.E. EGLIN PARKWAY
FORT WALTON BEACH, FL 32548

7. Name and Address of New Registered Agent

Name
Helen Padawer

Street Address (P.O. Box Number is Not Acceptable)

3899 Mesa Road

City
Destin

FL Zip Code
32541

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Helen Padawer*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

12-01-06

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
COLQUITT, ETHEL K
6222 KATHY LANE
SHREVEPORT, LA 71105 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
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☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
SUSAN C. MCKIBBEN
6305 Querves Drive
Shreveport, LA. 71106 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
MGRM
LINDA C. TAYLOR
7 WINDWARD ROAD
Fort Worth, TEXAS 76132 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *Susan C. McKibben*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

11/28/2006 318-861-7868
Date Daytime Phone #