




<b>Tom Schedler</b> <b>Secretary of State</b> 	<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>For Period Ending</b> 11/8/2013	 36046994K  2013		
<b>Mailing Address Only (INDICATE CHANGES TO THIS ADDRESS IN THIS BOX)</b> 36046994 K DSDSD, LLC  1095 FLORIDA AVE. SLIDELL, LA 70458	1	<b>(INDICATE CHANGES TO THIS ADDRESS IN THIS BOX)</b> <b>Registered Office Address in Louisiana</b> (Do not use P. O. Box) 1095 FLORIDA AVE. SLIDELL, LA 70458  <div style="border: 1px solid black; width: 100px; height: 20px; margin-left: auto; margin-right: auto;">Federal Tax ID Number</div>		
Our records indicate the following registered agents for the company. Indicate any changes or deletions below. All agents must have a Louisiana address. Do not use a P. O. Box. <b>A</b> <b>NEW REGISTERED AGENT REQUIRES A NOTARIZED SIGNATURE.</b> EMMETT G. DAMMON 34487 TORREGANO RD. SLIDELL, LA 70460				
I hereby accept the appointment of registered agent(s).  <div style="border: 1px solid black; width: 100%; height: 40px; margin-top: 10px; text-align: center;"><b>New Registered Agent Signature</b></div>	Sworn to and subscribed before me on <b>NOTARY NAME MUST BE TYPED OR PRINTED WITH NOTARY #</b>  <div style="display: flex; justify-content: space-between; border-top: 1px solid black; margin-top: 10px;"> <span><b>Notary Signature</b></span> <span><b>Date</b></span> </div>			
This report reflects a maximum of three members/managers for the company. Indicate any changes or deletions below. Include a listing of all names and addresses. Do not use a P. O. Box. If additional space is needed attach an addendum. <i>Officer titles, such as president or secretary are not acceptable.</i>				
EMMETT G. DAMMON 34487 TORREGANO RD. SLIDELL, LA 70460  STEVE STUBENRACH 3030 S. PALM SLIDELL, LA 70460  ROY STUBENRAUCH 100 JANE DR. SLIDELL, LA 70460	Member  Member  Member			
The filing of a false public record, with the knowledge of its falsity, is a crime, subjecting the filer to the fine or imprisonment or both under R.S. 14:133.				
<b>SIGN →</b>	To be signed by a manager, member, or agent	Title	Phone	Date
	Signee's address	Email Address		(For Office Use Only)
Enclose filing fee of \$30.00 Make remittance payable to Secretary of State <b>Do Not Send Cash</b> <b>Do Not Staple</b> web site: <a href="http://www.sos.louisiana.gov">www.sos.louisiana.gov</a>		Return by: 11/8/2013  To: <b>Commercial Division</b> <b>P. O. Box 94125</b> <b>Baton Rouge, LA 70804-9125</b> <b>Phone (225) 925-4704</b>		
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UNSIGNED REPORTS WILL BE RETURNED