





PAID

**Billed To**  
DERRYL LEE  
168 KNIPPERSVILLE  
FLORIEN Louisiana 71429  
**Phone:** (318) 508-1025

**RECEIPT**  
  
**Phone:** (318) 443-6614

**Equipment & Vehicle Auction**  
**Receipt #:** 26291-6243-1  
**Bidder:** 309  
**Paid on Date:** 3/4/2023

Lot #	Title	Bid	Premium	Tax	Total
	100 <b>2009 Ford E-450 Bus</b> Runs but has miss, 6.0 Diesel VIN: 1FDDE45PX9DA546432009 FORD E-450 <b>VIN:</b> 1FDDE45PX9DA54643	\$3,000.00	\$300.00	Tax Exempt	\$3,350.00
Title Processing Fee \$50.00					
	140A <b>1975 Ranger Boat with Johnson 70HP Motor</b> 1975 16'Ranger Boat 1975 Boat Trailer Vin# 783220	\$500.00	\$50.00	Tax Exempt	\$600.00
Title Processing Fee \$50.00					
<b>Totals</b>		<b>\$3,500.00</b>	<b>\$350.00</b>	<b>\$0.00</b>	<b>\$3,950.00</b>

**Payments**

**Cash** \$3,950.00  
added on 3/4/2023 at 11:26 AM by an admin  
0% Surcharge \$0.00  
Subtotal: \$3,950.00  
Expenses: \$0.00  
Payment Surcharges: \$0.00  
**Receipt Total: \$3,950.00**  
Payments: \$3,950.00  
Balance: \$0.00

# STATE OF LOUISIANA

## CERTIFICATE OF TITLE

VIN 783220				TITLE NUMBER 85031498		DATE ISSUED 12/03/2013	
MAKE MOOD	MODEL	BODY BT	COLOR BLK/	YR 1975	DATE ACQUIRED 07/24/2013	ODOMETER CL	N/U U

\* \* MAIL TO \* \*

MARY M PAUL

176 HANSEN CIRCLE  
PINEVILLE LA 71360

\* \* OWNER \* \*  
MARY M PAUL

176 HANSEN CIRCLE  
PINEVILLE LA 71360

(LIEN)

DATE

First Lien Released \_\_\_\_\_ Date

Lienholder

By \_\_\_\_\_ Authorized Representative

Second Lien Released \_\_\_\_\_ Date

Lienholder

By \_\_\_\_\_ Authorized Representative

The undersigned as Vehicle Commissioner of the State of Louisiana, certifies that the applicant named herein has been duly registered in this office as owner of the motor vehicle described, pursuant to the laws of the State of Louisiana, subject to the mortgages and encumbrances, if any, herein set forth:

In witness whereof, I have affixed my signature at Baton Rouge.

*Stephen F. Campbell*



FORM

1879

A 1879

38603891

DPSMV 1663 (R7/07)

ANY ALTERATION OR ERASURE VOIDS THIS DOCUMENT

KEEP IN SAFE PLACE

TO TEST FOR AUTHENTICITY, HOLD DOCUMENT TO LIGHT AND VERIFY EAGLE'S HEAD WATERMARK

TO TEST FOR AUTHENTICITY, HOLD DOCUMENT TO LIGHT AND VERIFY EAGLE'S HEAD WATERMARK

Federal and State Law require that you take the mileage in connection with transfer of ownership. Failure to provide ODOMETER STATEMENT OR providing a FALSE STATEMENT may result in fines and/or imprisonment.

\*\*\*NOTICE: ANY ALTERATION OR ERASURE, Voids THE ASSIGNMENT and all assignments that follow. ASSIGNMENT MUST BE EXECUTED BY THE SELLER IN THE PRESENCE OF A NOTARY PUBLIC OR TWO (2) WITNESSES. IF EXECUTED IN THE PRESENCE OF TWO (2) WITNESSES, THE ACKNOWLEDGEMENT OF WITNESS MUST BE SIGNED BY ONE (1) OF THE WITNESSES IN THE PRESENCE OF A NOTARY PUBLIC.\*\*\*

ASSIGNMENT OF TITLE BY REGISTERED OWNER (not valid unless completed in full). I/we warrant this title and certify that the vehicle described herein has been transferred on 3 / 4 / 23 at the sum of \$ 500.00 to the following:

Name(s): Darryl Lee Address: 167 Knappaville Flats hwy 71479

I certify to the best of my knowledge that the ODOMETER READING is the ACTUAL MILEAGE of the vehicle unless one of the following statements is checked:

☐ NO MILEAGE  
1. The mileage stated is in excess of its mechanical limits.  
☐ 2. The odometer reading is NOT the actual mileage.  
WARNING-ODOMETER DISCREPANCY

SIGNATURE(S) of Buyer(s): [Signature] of Seller(s): [Signature]

PRINTED NAME(S) of Buyer(s): [Name] of Seller(s): [Name]

SIGNATURE of Witness: [Signature] Sworn to and subscribed by seller before me this 3-4-23 Date: 3-4-23 Notary No. [Number]

PRINTED NAME of Witness: [Name] SIGNATURE of Notary Public: [Signature]

SIGNATURE of Witness: [Signature] PRINTED NAME of Notary Public: [Name]

PRINTED NAME of Witness: [Name]

ACKNOWLEDGEMENT OF WITNESS - STATE OF LOUISIANA - PARISH OF [Parish]  
Before me, Notary, personally came and appeared the undersigned, who, after being duly sworn, said that he subscribed his name to the assignment above as a witness to the signature(s) of seller(s) and he saw seller(s) sign his name as his voluntary act and deed. DATE [Date]

SIGNATURE of Witness: [Signature] SIGNATURE of Notary Public: [Signature]

PRINTED NAME of Witness: [Name] PRINTED NAME of Notary Public: [Name]

FIRST RE-ASSIGNMENT BY LICENSED DEALER DEALER'S LICENSE NO. [Number]

I/we warrant this title and certify that the vehicle described herein has been transferred to the following:

Name(s): [Name] Address: [Address]

I certify to the best of my knowledge that the ODOMETER READING is the ACTUAL MILEAGE of the vehicle unless one of the following statements is checked:

☐ NO MILEAGE  
1. The mileage stated is in excess of its mechanical limits.  
☐ 2. The odometer reading is NOT the actual mileage.  
WARNING-ODOMETER DISCREPANCY

SIGNATURE(S) of Buyer(s): [Signature] of Seller(s): [Signature]

PRINTED NAME(S) of Buyer(s): [Name] of Seller(s): [Name]

SIGNATURE of Witness: [Signature] Name of Dealership: [Name]

PRINTED NAME of Witness: [Name] Sworn to and subscribed by seller before me this [Date] Date: [Date] Notary No. [Number]

SIGNATURE of Witness: [Signature] SIGNATURE of Notary Public: [Signature]

PRINTED NAME of Witness: [Name] PRINTED NAME of Notary Public: [Name]

ACKNOWLEDGEMENT OF WITNESS - STATE OF LOUISIANA - PARISH OF [Parish]

Before me, Notary, personally came and appeared the undersigned, who, after being duly sworn, said that he subscribed his name to the assignment above as a witness to the signature(s) of seller(s) and he saw seller(s) sign his name as his voluntary act and deed. DATE [Date]

SIGNATURE of Witness: [Signature] SIGNATURE of Notary Public: [Signature]

PRINTED NAME of Witness: [Name] PRINTED NAME of Notary Public: [Name]

SECOND RE-ASSIGNMENT BY LICENSED DEALER DEALER'S LICENSE NO. [Number]

I/we warrant this title and certify that the vehicle described herein has been transferred to the following:

Name(s): [Name] Address: [Address]

I certify to the best of my knowledge that the ODOMETER READING is the ACTUAL MILEAGE of the vehicle unless one of the following statements is checked:

☐ NO MILEAGE  
1. The mileage stated is in excess of its mechanical limits.  
☐ 2. The odometer reading is NOT the actual mileage.  
WARNING-ODOMETER DISCREPANCY

SIGNATURE(S) of Buyer(s): [Signature] of Seller(s): [Signature]

PRINTED NAME(S) of Buyer(s): [Name] of Seller(s): [Name]

SIGNATURE of Witness: [Signature] Name of Dealership: [Name]

PRINTED NAME of Witness: [Name] Sworn to and subscribed by seller before me this [Date] Date: [Date] Notary No. [Number]

SIGNATURE of Witness: [Signature] SIGNATURE of Notary Public: [Signature]

PRINTED NAME of Witness: [Name] PRINTED NAME of Notary Public: [Name]

ACKNOWLEDGEMENT OF WITNESS - STATE OF LOUISIANA - PARISH OF [Parish]

Before me, Notary, personally came and appeared the undersigned, who, after being duly sworn, said that he subscribed his name to the assignment above as a witness to the signature(s) of seller(s) and he saw seller(s) sign his name as his voluntary act and deed. DATE [Date]

SIGNATURE of Witness: [Signature] SIGNATURE of Notary Public: [Signature]

PRINTED NAME of Witness: [Name] PRINTED NAME of Notary Public: [Name]

THIS TITLE MUST BE DISMANTLED BY DISMANTLER TO THE OFFICE OF MOTOR VEHICLES WHEN VEHICLE IS JUNKED

**BILL OF SALE OF BOAT/MOTOR**

STATE OF LOUISIANA

PARISH OF Rapides

**BEFORE ME**, the undersigned Notary Public, duly commissioned and qualified in and for the parish and state aforesaid, personally came and appeared:

Mary L Paul  
**SELLER**

Seller, of legal age, who hereby sells and delivers with full and general warranty of title/registration unto:

Darryl Lee  
**BUYER**

Buyer, of legal age, the following movable property:

<u>LA-03 71-TT</u>	<u>1975</u>	<u>Ranger</u>
<b>Registration Number (if registered)</b>	<b>Model Year</b>	<b>Manufacturer/Make</b>

**Boat Hull Identification Number (HIN)**

**Motor Serial Number**

<b>Sale Price:</b>	<u>250.00</u>	<u>250.00</u>	<b>Date of Sale:</b> <u>3-4-23</u>
	Boat	Motor	

Seller warrants that there are no mortgages, liens or encumbrances of any kind against the movable property sold or any accessories attached thereon.

SIGNED on this 4th day of March, 2023.

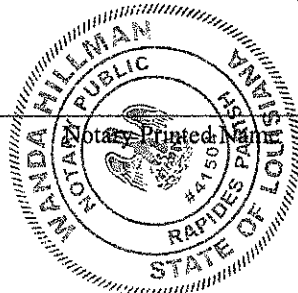
Mary L Paul  
Seller Signature/Printed Name

\_\_\_\_\_  
Witness Signature/Printed Name

\_\_\_\_\_  
Buyer Signature/Printed Name

\_\_\_\_\_  
Witness Signature/Printed Name

Manda Hillman  
Notary Signature



\_\_\_\_\_  
Notary ID

# BOAT REGISTRATION CERTIFICATE

State of Louisiana



Reg. No. LA-0371-TT Expires 02/09/2024 ANTIQUE

<u>Mod Yr</u> 1975	<u>Hull ID No.</u>	<u>Length</u> 16' 0"	<u>Make</u> Ranger	<u>Decal No.</u> 029906-24
<u>Use</u> Pleasure		<u>Hull</u> Fiberglass		
<u>Engine Drive</u> unknown	<u>Fuel</u> Gasoline	<u>Type</u> Other	<u>Propulsion</u> Outboard	

Department of Wildlife and Fisheries  
Boat Registration  
Post Office Box 14796  
Baton Rouge, LA 70898-9000

AUBREY D PAUL SR  
176 HANSEN CT  
PINEVILLE, LA 71360

- Owner Information  
1) Always carry the attached registration card on vessel when in use.  
2) Stop and render aid or assistance if involved in a boating accident.
- If the Certificate or Decals are Lost or Destroyed  
Owner must submit an application and appropriate duplicate certificate fee to Department of Wildlife and Fisheries. In the case of lost or destroyed decals, owner must submit an application for duplicate certificate and decals. The bottom of the application must include the reason for the duplicate decals, original signature and must be notarized. A copy of the application will be honored as a temporary certificate for a period not to exceed 30 days.
- If a Change of Ownership or Address Occur  
The owner/seller of a boat is required by law to report changes of ownership or change of address to Department of Wildlife & Fisheries within 15 days of the occurrence.
- If Loss, Destruction or Abandonment of Motorboat Occurs  
Owner must surrender to Department of Wildlife and Fisheries certificate of number along with a signed statement giving the date of destruction or abandonment within 15 days.
- If the Motorboat is Stolen  
The owner of a boat is required to report any registered boat, which has been stolen, to the Department of Wildlife and Fisheries within 5 days of discovering the theft.
- Report Boating Accidents  
The operator of a vessel involved in a collision, crash, or other casualty involving a recreational vessel and resulting in death or injury to a person or property damage in excess of \$500 must give notice of the incident immediately, by the most prompt means of communication, to the Department of Wildlife and Fisheries, at 225-765-2441 or www.wlf.louisiana.gov or in writing to Attn: Boating Accidents, P.O. Box 98000, Baton Rouge, Louisiana 70898. To obtain forms for reporting a boating accident, contact the nearest Wildlife & Fisheries office

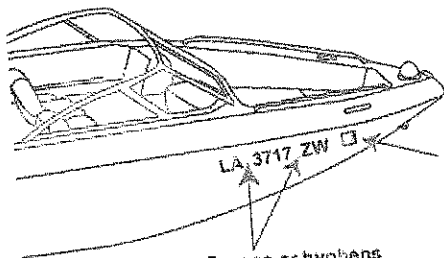
## \*\*\*\*\*VIOLATIONS\*\*\*\*\*

Any person who violates any of these provisions or provides any false information shall be subject to criminal prosecution.

It is a violation of Federal and State law to knowingly possess any vessel or motor from which the Hull Identification or Serial Number has been removed or altered.

FOR BOATING SAFETY CLASSES VISIT <http://www.wlf.louisiana.gov/boating/courses>

Certificate number shall be painted on, or attached to, each side of the bow, reading from left to right in block characters no less than 3 inches in height in a color which will contrast with the color of the background. Hyphens or equivalent spaces must separate graphic numerals from the LA-prefix and capital letters suffix (LA is part of your number).



Spaces or hyphens should appear here



## OFFICIAL BOAT REGISTRATION CERTIFICATE

Reg. No. LA-0371-TT Expires 02/09/2024 ANTIQUE	
AUBREY D PAUL SR 176 HANSEN CT PINEVILLE, LA 71360	
<u>Mod Yr</u> 1975	<u>Hull ID No.</u>
<u>Use</u> Pleasure	<u>Length</u> 16' 0"
<u>Engine Drive</u> unknown	<u>Make</u> Ranger
<u>Fuel</u> Gasoline	<u>Hull</u> Fiberglass
	<u>Type</u> Other
	<u>Propulsion</u> Outboard
	<u>Decal #</u> 029906

SIGNATURE REQUIRED ON REVERSE SIDE

Louisiana Department of Wildlife & Fisheries  
Boat Title and Registration  
Affidavit for Transfer of Decedent's Boat

This form is to be used only when a boat is registered in the name of a deceased owner and the heirs and legatees desire to confirm their ownership interest and consent to transfer title.

**THIS IS TO CERTIFY THAT**

Aubrey Dale Paul Sr.  
(deceased owner - copy of Death Certificate Attached)  
whose residence at the time of death was \_\_\_\_\_

176 Hansen Crt. Ball, LA 71405  
\_\_\_\_\_, died on January 4, 20 13.  
(date)

hereinafter referred to as decedent, is the registered owner of the following described boat:

1975 Ranger  
Year Make Model Hull Identification No. LA-0371-TT  
Louisiana Title No. (if applicable) Current Louisiana Registration No.

**DECLARATION**

Upon my/our oath, I/we solemnly swear that the information on this form and the following statements as checked below are true and correct:

☐ The decedent died intestate (i.e., no will).

☒ The decedent died testate (copy of will or notarized statement by one in lawful possession of the original summarizing the disposition of boats contained in the will attached).

Under penalties provided for providing false reports, I/we declare that no one has been or is expected to qualify as administrator or executor of the decedent's estate and that this affidavit (including any accompanying schedules and statements) is to the best of my /our knowledge and belief, a true, correct, and complete identification of death circumstances and legal heirs and legatees of the decedent.

By signing this document, each heir and legatee consents to the transfer of the title of the above described boat as provided herein.

If there is only one surviving heir or legatee and he/she wishes to title the boat in his/her name, this affidavit with attachments will be acceptable. If one of the heirs or legatees is a surviving spouse and he/she wishes to transfer the boat to a new owner, this affidavit must be completed by him/her as well as all other heirs and legatees, but only the surviving spouse is required to execute a notarized bill of sale or act of donation. If there is no surviving spouse and the sale or donation is to a new owner, a bill of sale or act of donation must be executed by all heirs and legatees. Statement by leinholder approving the transfer must be attached, if applicable.

The applicant must surrender the previous title, if available.

In addition, appropriate title and registration applications and fees must be submitted.

Please send check or money order made payable to the Louisiana Department of Wildlife and Fisheries to cover any fees due.  
**PLEASE DO NOT SEND CASH.**

ENTER NAME & ADDRESS OF SURVIVING SPOUSE			
Name	<u>Mary L. Paul</u>		
Address	<u>176 Hansen Crt.</u>		
City & State	<u>Ball, LA</u>		
Telephone	<u>(318) 640-3240</u>		
Signature	<u>Mary L. Paul</u>		
Sworn and subscribed before me			
this <u>4th</u> day of <u>March</u> , 20 <u>13</u>			
Notary Public Signature	Printed Name	ID #	Parish (County) State

ENTER NAME & ADDRESS OF HEIR OR LEGATEE (If Minor, Must List Age)			
Name	Age: _____		
Address	_____		
City & State	_____		
Relation to Decedent	_____		
Signature	_____		
Sworn and subscribed before me			
this _____ day of _____, 20 _____			
Notary Public Signature	Printed Name	ID#	Parish (County) State

ENTER NAME & ADDRESS OF HEIR OR LEGATEE (If Minor, Must List Age)			
Name	Age: _____		
Address	_____		
City & State	_____		
Relation to Decedent	_____		
Signature	_____		
Sworn and subscribed before me			
this _____ day of _____, 20 _____			
Notary Public Signature	Printed Name	ID#	Parish (County) State

ENTER NAME & ADDRESS OF HEIR OR LEGATEE (If Minor, Must List Age)			
Name	Age: _____		
Address	_____		
City & State	_____		
Relation to Decedent	_____		
Signature	_____		
Sworn and subscribed before me			
this _____ day of _____, 20 _____			
Notary Public Signature	Printed Name	ID#	Parish (County) State

**All Heirs And Legatees Must Be Listed**  
(Use additional pages if needed)

DEPARTMENT OF WILDLIFE AND FISHERIES  
P.O. BOX 14796  
BATON ROUGE, LOUISIANA 70898-4796

(WE) DECLARE UNDER THE PENALTIES PRESCRIBED IN THE LOUISIANA  
STATUTE THAT TO THE BEST OF MY (OUR) KNOWLEDGE AND BELIEF  
THAT I (WE) OWN THE VESSEL DESCRIBED HEREIN AND THAT THE  
DESCRIPTION AND ALL MATTERS STATED HEREIN ARE TRUE AND CORRECT.

NOT VALID UNLESS SIGNED

*Mary L. Paul*

# STATE OF LOUISIANA

## CERTIFICATION OF DEATH

BIRTH NUMBER:

THIS RECORD IS VALID FOR DEATH ONLY

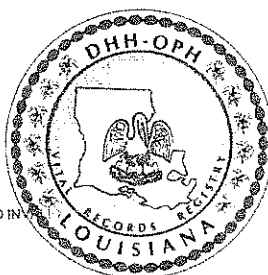
STATE FILE NUMBER: 2013-000-00223

2818010

<b>DECEDENT</b>	DECEDENT'S NAME - (LAST, FIRST, MIDDLE, SUFFIX) PAUL, AUBREY DALE		DATE OF BIRTH 04/23/1938	DATE OF DEATH 01/04/2013	TIME OF DEATH 12:30 AM
	PLACE OF BIRTH - (CITY, STATE, COUNTRY) DEVILLE, LA UNITED STATES		SEX MALE	SOCIAL SECURITY NUMBER 434-56-5801	AGE 74 YEARS
	DECEDENT'S ALIAS NAME(S) - (LAST, FIRST, MIDDLE, SUFFIX):				
	RESIDENCE OF DECEDENT - (STREET ADDRESS, CITY, STATE, ZIP CODE, COUNTRY) 176 HANSEN CT., BALL, LA 71405 UNITED STATES				
<b>PERSONAL</b>	EVER IN U.S. ARMED FORCES? YES		OCCUPATION BUSINESS OWNER	INDUSTRY OF OCCUPATION RETAIL	
	MARITAL STATUS MARRIED		NAME OF SURVIVING SPOUSE (LAST, FIRST, MIDDLE, SUFFIX) MABOU, MARY L		
	FATHER'S NAME - (LAST, FIRST, MIDDLE, SUFFIX) PAUL, SAMUEL PARSON		FATHER'S PLACE OF BIRTH - (CITY, STATE, COUNTRY) DEVILLE, LA UNITED STATES		
	MOTHER'S NAME - (LAST, FIRST, MIDDLE, SUFFIX) OLIVE, ESSIE DALE		MOTHER'S PLACE OF BIRTH - (CITY, STATE, COUNTRY) MARSHALL, TX UNITED STATES		
	INFORMANT'S NAME - (LAST, FIRST, MIDDLE, SUFFIX) PAUL, KEVIN R		RELATIONSHIP TO DECEDENT SON	INFORMANT'S ADDRESS 153 BENTON RD., BALL, LA 71405 UNITED STATES	
	EDUCATION: HIGH SCHOOL GRADUATE, OR GED COMPLETED				
	OF HISPANIC ORIGIN?: NO, NOT SPANISH/HISPANIC/LATINO				
	RACE: WHITE				
<b>DEATH INFO</b>	PLACE OF DEATH INPATIENT		FACILITY NAME RIVERSIDE HOSPITAL OF LOUISIANA		
	FACILITY ADDRESS - (STREET ADDRESS, CITY, STATE, ZIP CODE, COUNTRY) 211 FOURTH ST., APT/STE 5, ALEXANDRIA, LA 71301 UNITED STATES		PARISH/COUNTY RAPIDES		
<b>DISPOSITION</b>	METHOD OF DISPOSITION BURIAL		PLACE OF DISPOSITION BRADFORD CEMETERY		
	PLACE OF DISPOSITION - (CITY, STATE, COUNTRY) DEVILLE, LA UNITED STATES		DATE OF DISPOSITION 01/07/2013		
<b>FUNERAL FACILITY</b>	FUNERAL FACILITY NAME HIXSON BROTHERS FUNERAL HOME, LLC - ALEXANDRIA		ADDRESS OF FUNERAL FACILITY 701 JACKSON ST., ALEXANDRIA, LA 71308 UNITED STATES		
	NAME OF FUNERAL DIRECTOR (LAST, FIRST, MIDDLE, SUFFIX) LUNEAU, TERRY		LICENSE NUMBER E2202	CORONER NOTIFIED? N	
	SIGNATURE OF FUNERAL DIRECTOR		DATE 1/10/2013		
<b>MEDICAL INFO</b>	MANNER OF DEATH		NATURAL		
	IF FEMALE?		NOT APPLICABLE		
	DID TOBACCO USAGE CONTRIBUTE TO DEATH?		NO		
<b>CAUSE OF DEATH</b>	PART I. Enter the chain of events - diseases, injuries, or complications - that directly caused the death. DO NOT enter terminal events such as cardiac arrest, respiratory arrest, or ventricular fibrillation without showing the etiology. DO NOT ABBREVIATE.				APPROXIMATE INTERVAL: Onset to Death
	IMMEDIATE CAUSE - (Final disease or condition resulting in death)				a. RESPIRATORY FAILURE UNK
	Sequentially list conditions, if any, leading to the cause listed on line a.				b. PNEUMONIA UNK
	Enter the UNDERLYING CAUSE (disease or injury that initiated the events resulting in death) LAST				c. DYSPHAGIA UNK
					d. PARKINSON UNK
	PART II. Enter other significant conditions contributing to death but not resulting in the underlying cause given in PART I.				
	WAS AN AUTOPSY PERFORMED?		FINDINGS USED IN DETERMINING CAUSE?		
	NO		NOT APPLICABLE		
<b>INJURY INFORMATION</b>	PLACE OF INJURY		DATE OF INJURY	TIME OF INJURY	INJURY AT WORK
	LOCATION OF INJURY - (STREET ADDRESS, CITY, STATE, ZIP CODE, COUNTRY)		IF TRANSPORTATION INJURY, SPECIFY:		
	DESCRIBE HOW INJURY OCCURRED		PARISH/COUNTY		
<b>CERTIFIER</b>	I CERTIFY THAT I ATTENDED THE DECEDENT FROM 9/8/2008 TO 1/4/2013 AND THAT DEATH OCCURED ON THE DATE AND HOUR STATED AND DUE TO THE CAUSE(S) AND MANNER STATED.				
	SIGNATURE OF CERTIFIER:		DATE		1/8/2013
	CERTIFIER NAME - (LAST, FIRST, MIDDLE, SUFFIX) BUCKLEW, TERRY Z III				
	CERTIFIER TITLE: CERTIFYING PHYSICIAN				
	CERTIFIER ADDRESS - (STREET ADDRESS, CITY, STATE, ZIP CODE, COUNTRY) 1337 CENTRE CT., ALEXANDRIA, LA 71301 UNITED STATES				
	BURIAL TRANSIT PERMIT 21980	PARISH OF ISSUE ORLEANS	DATE OF ISSUE 01/07/2013	DATE FILED WITH REGISTRAR 1/10/2013	
<b>REGISTRAR</b>	SIGNATURE OF REGISTRAR DARLENE W. SMITH "e-sign"				

ISSUED BY: Robbins, Jeannie Marie

Issued On: 1/14/2013 8:25:48 AM



I CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF A CERTIFICATE OR DOCUMENT REGISTERED WITH THE VITAL RECORDS REGISTRY OF THE STATE OF LOUISIANA, PURSUANT TO LSA -- R.S.40:32, ET SEQ.

*Darlene W. Smith*  
STATE REGISTRAR