

# Restoration Tax Abatement Program Partial Transfer of Ownership to New Company - (Const 7 21)

**Project ID:** 20150237-RTA

**Date Received:** 3/15/2022

## PROJECT INFORMATION

**Company:** Studio Network - Shreveport I, LLC  
**Project Name:** 600 Block of Texas Restorations  
**Project Location:** 624 Texas Street , Shreveport, LA, 71101  
**Parish:** Caddo  
**City Limits?:**

## REQUEST PARTIAL TRANSFER OF OWNERSHIP

**New Company Name:** 624 Downtown Lofts, LLC  
**Fiscal Year (Month/Day):** 12/31  
**NAICS Code:** 531110  
**Studio Network - Shreveport I, LLC retains:** \$0.00"      **624 Downtown Lofts, LLC is transferred:** \$0.00"

**Explain the reason for change in ownership:**

Property located at 624 Texas Street was sold to 624 Downtown Lofts, LLC, and Las Palmas Lofts, LLC, on February 11, 2022.

**Effective Date of Change:** 2/11/2022"

This instrument will be considered by the undersigned as an amendment to the contract accepting this amendment when it has been approved and executed by the State through an authorized representative of the Board of Commerce and Industry.

## FEES

**Assessed Fee:** \$250.00  
**Amount Due:** \$250.00

## ATTACHMENTS

Document Type	Document Name	Date
Proof Louisiana Department of Revenue	Lofts @ 624 - Act of Sale (Building) RECORDED.pdf	3/15/2022
Proof Louisiana Department of Revenue	IMG_7123.PNG	3/15/2022
Proof Louisiana Secretary of State	Secofstate.pdf	3/15/2022

## PAYMENTS

Fee Type	Amount Paid	Date Received	Confirmation #	Transaction Type
CPT	\$250.00	3/15/2022	OPVRM63V9Q	amex_credit

## PROJECT CONTACTS

Contact First Name	Contact Last Name	Email Address	Company Name	Mailing Address	Phone Number	Contact Type
Mark	Yates	myates@centrapartners.com	624 Downtown Lofts, LLC	8310 Kelsey Pass , Missouri City, TX, 77459	(281) 744- 4684	Business Signatory
Nick	Dietzen	ndietzen@dwyercambre.com	Dwyer Cambre & Suffern	3000 West Esplanade Ave. Suite 200, Metairie, LA, 70002	(504) 838- 9090	Consultant

## CONTRACT SIGNATORY

The contract signatory will be used when signing contracts. The contracts will be signed online and will take place after the board approves a form.

Title: Managing Partner

First Name: Mark

Last Name: Yates

Email Address: myates@centrapartners.com

## CERTIFICATION STATEMENT

I hereby certify that this project meets all Constitutional, statutory and regulatory provisions applicable to this program. I hereby certify that the information provided in this document and additional materials is true and correct and that I am aware that my submission of any false information or omission of any pertinent information resulting in the false representation of a material fact may subject me to civil and/or criminal penalties for filing false public records (R.S. 14:133) and/or forfeiture of any tax benefits approved under this program. I understand that the application and information submitted shall not be returnable to the applicant.

## FORM SIGNATURE

I, **Mark Yates**

, approve the above information.

