

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000090020

**Entity Name:** PHOTOGRAPHY BLU LLC

**Current Principal Place of Business:**

13983 SPECTOR ROAD  
#201  
LITHIA, FL 33547

**Current Mailing Address:**

13983 SPECTOR ROAD  
#201  
LITHIA, FL 33547 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

HINNANT, TY E  
13983 SPECTOR ROAD  
#201  
LITHIA, FL 33547 US

*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.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGRM
Name	HINNANT, CHRISTINA F	Name	HINNANT, TY
Address	13983 SPECTOR ROAD #201	Address	13983 SPECTOR ROAD #201
City-State-Zip:	LITHIA FL 33547	City-State-Zip:	LITHIA FL 33547

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** TY HINNANT

**MANAGING MEMBER**

**03/28/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date