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: GADJEV ISABELLA

Electronic Signature of Signing Authorized Person(s) Detail

MANAGER

04/30/2018

3771 JULIAS WAY

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	: GADJEV ISABELLA			04/30/2018
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	TREASURER	
Name	GADJEV, ISABELLA	Name	COLTON, MICHAELA	
Address	PO BOX 07351	Address	PO BOX 07351	
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	FORT MYERS FL 33919	

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000081449

Entity Name: GULFSIDEMEDIA PHOTOGRAPHY LLC.

Current Principal Place of Business:

13771 JULIAS WAY #225 FORT MYERS, FL 33919

Current Mailing Address:

PO BOX 07351 FORT MYERS, FL 33919 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

GADJEV, ISABELLA 13771 JULIAS WAY #225 FORT MYERS, FL 33919 US

FILED Apr 30, 2018 Secretary of State CC4668832349

Certificate of Status Desired: No

Date