

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000073875

**Entity Name:** AMANDA AUSTIN PHOTOGRAPHY, LLC

**Current Principal Place of Business:**

3380 CITRINE CIRCLE  
CRESTVIEW, FL 32539

**Current Mailing Address:**

3380 CITRINE CIRCLE  
CRESTVIEW, FL 32539

**FEI Number:** 46-5589722

**Certificate of Status Desired:** Yes

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

AUSTIN, AMANDA  
3380 CITRINE CIRCLE  
CRESTVIEW, FL 32539 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 MGR  
Name AUSTIN, AMANDA  
Address 3380 CITRINE CIRCLE  
City-State-Zip: CRESTVIEW FL 32539

*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:** AMANDA AUSTIN

**OWNER**

**04/18/2015**

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

\_\_\_\_\_  
Date