5/15/

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Jun 24, 2002 8:00 am
Secretary of State

05-15-2002 90134 014 ****50.00

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000010542

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DO NOT WRITE IN THIS SPACE

1. Entity Name
PHOTO 2 ART, LLC.

Principal Place of Business
9900 STIRLING ROAD SUITE 222
HOLLYWOOD FL 33024

Mailing Address
9900 STIRLING ROAD SUITE 222
HOLLYWOOD FL 33024

2. Principal Place of Business
8180 NW 36 ST
Suite, Apt. #, etc.
100
City & State
MIAMI, FL
Zip 33166 Country USA

3. Mailing Address
8180 NW 36 ST
Suite, Apt. #, etc.
100
City & State
MIAMI FL
Zip 33166 Country USA

4. FEI Number 65-1119809 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent
TOVAR, JOSE G.
9900 STIRLING ROAD SUITE 222
HOLLYWOOD FL 33024

7. Name and Address of New Registered Agent
Name TOVAR DEL CORRAL, JOSE G.
Street Address (P.O. Box Number is Not Acceptable)
ARIAS TOVAR & ASSOCIATES, P.A
8180 NW 36 ST, SUITE 100
City MIAMI FL Zip Code 33166

8. 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 TOVAR DEL CORRAL JOSE G. TOVAR DEL CORRAL 4/25/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS / MANAGERS

TITLE	MGR
NAME	ZAFRANI, RICHARD
STREET ADDRESS	9900 STIRLING ROAD SUITE 222
CITY-ST-ZIP	HOLLYWOOD FL 33024

☐ Delete

10. ADDITIONS / CHANGES

TITLE	MGR
NAME	ZAFRANI, RICHARD
STREET ADDRESS	8180 NW 36ST, SUITE 100
CITY-ST-ZIP	MIAMI, FL 33166

☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: * SIGNATURE REQUIRED RICHARD ZAFRANI, MGR 4/25/02 (305)477-7104
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #

CR2E083 (9/01)