

# **2006 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000092809

Entity Name: EHOLA PHOTO LLC

**FILED**  
**Aug 07, 2006**  
**Secretary of State**

**Current Principal Place of Business:**

11046 CRYSTAL GLEN BLVD.  
ORLANDO, FL 32837

**New Principal Place of Business:**

13354 HATHERTON CIRCLE  
ORLANDO, FL 32832

**Current Mailing Address:**

P.O. BOX 621567  
ORLANDO, FL 328621567 US

**New Mailing Address:**

FEI Number: 20-2042623      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

SANCHEZ, VLADIMIR  
11046 CRYSTAL GLEN BLVD.  
ORLANDO, FL 32837 US

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

SANCHEZ, VLADIMIR  
13354 HATHERTON CIRCLE  
ORLANDO, FL 32822 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: VLADIMIR SANCHEZ

08/07/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: SANCHEZ, VLADIMIR  
Address: 11046 CRYSTAL GLEN BLVD  
City-St-Zip: ORLANDO, FL 32837

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: SANCHEZ, VLADIMIR  
Address: 13354 HATHERTON CIRCLE  
City-St-Zip: ORLANDO, FL 32832

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: VLADIMIR SANCHEZ

MGR

08/07/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date