

# **2008 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L06000059647

**FILED**  
**Mar 12, 2008**  
**Secretary of State**

**Entity Name:** MATHEWS BROS. PHOTOGRAPHY, LLC

**Current Principal Place of Business:**

420 HAWTHORNE OAKS LANE, APT. 204  
ORLANDO, FL 32835

**New Principal Place of Business:**

302 HAWTHORNE HILLS PL  
#204  
ORLANDO, FL 32835

**Current Mailing Address:**

420 HAWTHORNE OAKS LANE, APT. 204  
ORLANDO, FL 32835

**New Mailing Address:**

302 HAWTHORNE HILLS PL  
#204  
ORLANDO, FL 32835

**FEI Number:** 20-5739011      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
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:**

MATHEWS, MARK  
420 HAWTHORNE OAKS LANE, APT. 204  
ORLANDO, FL 32835      US

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

WILLIAM N. ASMA, P.A.  
884 SOUTH DILLARD ST  
WINTER GARDEN, FL 34787      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: CHARLES N. ASMA

03/12/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MR. ( ) Change (X) Addition  
Name: MATHEWS, MARK G  
Address: 12103 WATERSTONE COURT #422  
City-St-Zip: ORLANDO, FL 32825

Title: MR. ( ) Change (X) Addition  
Name: MATHEWS, MICHAEL G  
Address: 302 HAWTHORNE HILLS PL #204  
City-St-Zip: ORLANDO, FL 32835

I hereby certify that the information supplied with this filing does not qualify 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: MICHAEL G. MATHEWS

MR.

03/12/2008

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