

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L07000029050

**FILED**  
**Sep 27, 2011**  
**Secretary of State**

**Entity Name:** REAGAN RULE PHOTOGRAPHY LLC

**Current Principal Place of Business:**

5760 SHIRLEY STREET  
#15  
NAPLES, FL 34109

**New Principal Place of Business:**

**Current Mailing Address:**

5760 SHIRLEY STREET  
#15  
NAPLES, FL 34109

**New Mailing Address:**

**FEI Number:** 26-0427814

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RULE, REAGAN R OWNER  
2200 NORTHWEST FLINT ROAD  
ARCADIA, FL 34266 US

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

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:** REAGAN RULE

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MS  
**Name:** RULE, REAGAN R  
**Address:** 5760 SHIRLEY STREET #15  
**City-St-Zip:** NAPLES, FL 34109

I hereby 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:** REAGAN RULE

MS.

09/27/2011

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