## **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

Fax Number

: (850)617-6383

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043

Phone

: (800)342-9856

Fax Number

: (800)354-3381

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

Shot By Ella PhotoArt, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

01-10264

The name of the Limited Liability Cor	mpany is:
Shot By Ella PhotoArt, Li	LC
(Must end with the words "Li	imited Lisbility Company, "L.L.C.," or "LLC.")
_	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Ella Chabot Remington	Ella Chabot Remington
1566 Polynesian Lane	1566 Polynesian Lane
the state of the s	
ARTICLE III - Registered Agent, R	Sebastian, FL 32958 Legistered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.  The name and the Florida street addresses.	Sebastian, FL 32958  Legistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate so individual or mother  as of the registered agent are:
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as it business entity with an softve Florida registration The name and the Florida street address  Ella Chab	Sebastian, FL 32958  Legistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate so individual or mother  as of the registered agent are:
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ARTICLE III - Registered Agent, R The Limited Liability Company cannot serve as it business entiry with an active Florida registration. The name and the Florida street address.  Elli Chab  1566 Polyne. Plorida	Sebastian, FL 32958  Legistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate so individual or mother .) ss of the registered agent are:

registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

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## (Ho)000250 8543)

Manager ≂ Managir	ng Member	Name and Address:		
MGRM	Ella Chabot Remington			
	1566 Polynesian Lane			
		Sebestian, FL 32958		
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