

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000078396

**Entity Name:** STEPHANIE PARKE PHOTOGRAPHY LLC

**Current Principal Place of Business:**

15501 BRUCE B DOWNS BLVD  
APT 810  
TAMPA, FL 33647

**FILED**  
**Apr 24, 2016**  
**Secretary of State**  
**CC2337600677**

**Current Mailing Address:**

15501 BRUCE B DOWNS BLVD  
APT 810  
TAMPA, FL 33647 US

**FEI Number: 45-3044806**

**Certificate of Status Desired: No**

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

PARKE, STEPHANIE  
15501 BRUCE B DOWNS BLVD  
APT 810  
TAMPA, FL 33647 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name PARKE, STEPHANIE F  
Address 15501 BRUCE B DOWNS BLVD  
APT 810  
City-State-Zip: TAMPA FL 33647

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: STEPHANIE PARKE**

**MGR**

**04/24/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date