

# **2009 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L08000092264

**FILED**  
**Oct 08, 2009**  
**Secretary of State**

**Entity Name:** INTERACTION LLC

**Current Principal Place of Business:**

700 E DANIA BEACH BLVD  
STE 202  
DANIA, FL 33004

**New Principal Place of Business:**

**Current Mailing Address:**

700 E DANIA BEACH BLVD  
STE 202  
DANIA, FL 33004

**New Mailing Address:**

**FEI Number:** 46-0521115      **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:**

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

PATRICK VIVIES CPA, PA  
700 E DANIA BEACH BLVD  
STE 202  
DANIA, FL 33004 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: PATRICK VIVIES CPA PA

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**ADDITIONS/CHANGES:**

Title: MGR      ( ) Delete  
Name: DARMON, MICHEL  
Address: 700 E. DANIA BEACH BLVD STE 202  
City-St-Zip: DANIA, FL 33004

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PATRICK VIVIES

CPA

10/08/2009

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