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**EXAMINER** 

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## ORIDA/FOREIGN LIMITED LIABILITY CO.

#### Interactium LLC

Certificate of Status	0
Certified Copy	0
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## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SURMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Interactium LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")
2. Delaware  (Jurisdiction under the law of which foreign limited liability company is organized)  3. 26-2813269  (FEI number, if applicable)
4. 6/12/2008  (Date of Organization)  5. PERPETUAL  (Duration: Year limited liability company will cease to exist or "perpetual")
6. (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7. 716 Foxglove Place, Brandon, Florida 33510
(Street Address of Principal Office)
8. If limited liability company is a manager-managed company, check here
9. The name and usual business addresses of the managing members or managers are as follows:
Cody Spinadel, 716 Foxglove Place, Brandon, Florida 33510
David Clark, 716 Foxglove Place, Brandon, Florida 33510
10 Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under eath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida:
All lawful business
Cary Amale
Signature of a member of an authorized representative of a member.  (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Cody Spinadel
Typed or printed name of signee

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

	of the Limited Liability Co	ompa	ny is:		
Interactium LL					ļ
If name unava	ilable, the alternate name	to be	used in the state of Florida is:		
2. The name a	and the Florida street addr	ess o	f the registered agent and office are:		
	Business Filings Incorpor	ated		_	
		<del>-</del>	(Name)	-	
•	1203 Governors Square Bl		uite 101, ess (P.O. Box <u>NOT</u> acceptable)	_	
	Florida Sacci	Auun	is (1.0. but heer that by		
	Tallahassee	· •	FL 32301-2960 City/State/Zip		
liability compa agent and agre relating to the	my at the place designated he to act in this capacity. I proper and complete perfo	in thi furthe rman	accept service of process for the above s is certificate, I hereby accept the appoint er agree to comply with the provisions of ace of my duties, and I am familiar with a as provided for in Chapter 608, Florida S	ment as register fall statutes nd accept the	red
Mark Williams,	(Signature) A.V.P., Business Filings Inc.	orpor	ated		
,	\$ 100. \$ 25. \$ 30.	,00	Filing Fee for Application  Designation of Registered Agent  Certified Copy (ontional)	SECI	J 80

\$ 5.00 Certificate of Status (optional)

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# Delaware

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### The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "INTERACTIUM LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-SECOND DAY OF JULY, A.D. 2008.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

OB JUL 23 AM IO: 54
SECRETARY OF STATE

4561028 8300

080807041

You may verify this cortificate online at corp. delaware. gov/authver.shtml

Warret Smith Windson, Secretary of State

AUTHENTICATION: 6744145

DATE: 07-22-08