

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000088231

**Entity Name:** IMPRESSION LLC

**Current Principal Place of Business:**

4350 NW 8TH CT  
PLANTATION, FL 33317

**Current Mailing Address:**

4350 NW 8TH CT  
PLANTATION, FL 33317 US

**FEI Number:** 27-3298951

**Certificate of Status Desired:** No

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

IMPRESSION LLC  
4350 NW 8TH CT  
PLANTATION, FL 33317 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:** CHRISTOPHER LONGSWORTH

11/20/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           LONGSWORTH, CHRISTOPHER  
Address        4350 NW 8TH CT  
City-State-Zip: PLANTATION FL 33317

Title           MANAGER  
Name           HSIAO, MICHAEL  
Address        4350 NW 8TH CT  
City-State-Zip: PLANTATION FL 33317

Title           MANAGER  
Name           INVESCA DEVELOPMENT GROUP  
Address        4350 NW 8TH CT  
City-State-Zip: PLANTATION FL 33317

*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:** CHRISTOPHER LONGSWORTH

MM

11/20/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date