## 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

**FILED** Nov 20, 2016

**Secretary of State** 

CR0473214738

Authorized Person(s) Detail:

Title MANAGER Title MANAGER

LONGSWORTH, CHRISTOPHER HSIAO, MICHAEL Name Name 4350 NW 8TH CT Address 4350 NW 8TH CT Address

City-State-Zip: PLANTATION FL 33317 City-State-Zip: PLANTATION FL 33317

Title MANAGER

INVESCA DEVELOPMENT GROUP Name

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