2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000076826

Entity Name: INTERSECTION UNLIMITED, LLC

FILED Aug 24, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1840 SW 22ND ST 3823 ALBACETE CIRCLE

4-438 PUNTA GORDA, FL 33950 US MIAMI, FL 33145

New Mailing Address: Current Mailing Address:

1840 SW 22ND ST 4-438

MIAMI, FL 33145 US

FEI Number: 26-0594423 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:

SPEIGEL & UTRERA, PA 1840 SW 22ND ST MIAMI, FL 33145

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES:

MANAGING MEMBERS/MANAGERS:

MBRM Title: MBRM (X) Change () Addition () Delete CHASE, NICHOLAS M CHASE, NICHOLAS M Name: Name: 19804 SW 191 AVE Address: 3823 ALBACETE CIRCLE Address: City-St-Zip: ARCHER, FL 32618 US City-St-Zip: PUNTA GORDA, FL 33950 US

Title: MGRM Title: MGRM (X) Change () Addition () Delete

MOTT, TROY Name: CHASE, SARAH Name:

Address: 504 JENIFER CT Address: 3823 ALBACETE CIRCLE City-St-Zip: SANTA ROSA, CA 95404 US City-St-Zip: PUNTA GORDA, CA 33950 US

Title: MGRM (X) Delete Title: () Change () Addition

HERBSTMAN, ROBERT Name: Name: 1684 HAPPY VALLEY RD Address: Address: City-St-Zip: SANTA ROSA, CA 95409 US City-St-Zip:

Title: MGRM (X) Delete Title: () Change () Addition

Name: CHASE, SARAH Name: 19804 SW 191 AVE Address: Address: City-St-Zip: ARCHER, FL 32618 US City-St-Zip:

Title: MRGM (X) Delete Title: () Change () Addition

SEIFERT, TIM Name: Name: 202 SIMON DRIVE Address: Address: City-St-Zip: PETALUMA, CA 94952 US 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: NICHOLAS CHASE **MGRM** 08/24/2008