

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000033316

Entity Name: USCLASSEFIEDS L.L.C.

FILED
Apr 29, 2009
Secretary of State

Current Principal Place of Business:

1131 S.E. 4TH ST. #307
BOYNTON BEACH, FL 33435 US

Current Mailing Address:

1131 S.E. 4TH ST. #307
BOYNTON BEACH, FL 33435 US

New Principal Place of Business:

1131 S.E. 4TH ST.
#303
BOYNTON BEACH, FL 33435 US

New Mailing Address:

1131 S.E. 4TH ST.
#303
BOYNTON BEACH, FL 33435 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIVINGSTON, NORMAN
1131 S.E. 4TH ST. #307
BOYNTON BEACH, FL 33435 US

Name and Address of New Registered Agent:

LIVINGSTON, NORMAN
1131 S.E. 4TH ST.
#303
BOYNTON BEACH, FL 33435 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:

04/29/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: LIVINGSTON, NORMAN
Address: 1131 S.E. 4TH ST. #307
City-St-Zip: BOYNTON BEACH, FL 33435 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: LIVINGSTON, NORMAN
Address: 1131 S.E. 4TH ST. #303
City-St-Zip: BOYNTON BEACH, FL 33435 US

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: NORMAN LIVINGSTON

MGRM

04/29/2009

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