

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000162401

Entity Name: AMBIT INTERSECT LLC

Current Principal Place of Business:

10139 HICKORY HILL DR
PORT RICHEY, FL 34668

Current Mailing Address:

10139 HICKORY HILL DR
PORT RICHEY, FL 34668 US

FEI Number: 81-3685733

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NOVAK, ALEXANDER D
10139 HICKORY HILL DR
PORT RICHEY, FL 34668 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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title DIR
Name NOVAK, ALEXANDER D
Address 10139 HICKORY HILL DR
City-State-Zip: PORT RICHEY FL 34668

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: ALEXANDER D NOVAK

DIRECTOR

02/15/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date