

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000040551

**Entity Name:** 180 DEGREES LLC

**Current Principal Place of Business:**

6996 PIAZZA GRANDE AVE.  
SUITE 203A  
ORLANDO, FL 32835

**Current Mailing Address:**

P O BOX 618221  
ORLANDO, FL 32861

**FEI Number:** 20-2731916

**Certificate of Status Desired:** No

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

WOOD, LAURA JCPA  
841 DOUGLAS AVE.  
SUITE 104  
ALTAMONTE SPRINGS, FL 32714 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            OWNE  
Name            SOLIS, MILAGROS V  
Address        P O BOX 618221  
City-State-Zip: ORLANDO FL 32861

*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:** MILAGROS SOLIS

**OWNER**

**04/28/2014**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date