

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000170758

**Entity Name:** NTH DEGREE WORKS LLC

**Current Principal Place of Business:**

20363 NW 32ND PLACE  
MIAMI GARDENS, FL 33056

**Current Mailing Address:**

P.O. BOX 552681  
MIAMI GARDENS, FL 33055 US

**FEI Number:** 47-5186610

**Certificate of Status Desired:** No

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

NELSON-GOEDERT, NICHOLAUS  
20363 NW 32ND PLACE  
MIAMI GARDENS, FL 33056 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            AMBR  
Name            NELSON-GOEDERT, CAROLYN  
Address        20363 NW 32ND PLACE  
City-State-Zip: MIAMI GARDENS FL 33056

Title            COO  
Name            NELSON-GOEDERT, NICHOLAUS  
Address        P.O. BOX 552588  
City-State-Zip: MIAMI GARDENS FL 33055

*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:** CAROLYN NELSON-GOEDERT

**PRESIDENT/CEO**

**03/31/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date