#### 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: LEONA STEFANOS

Electronic Signature of Signing Authorized Person(s) Detail

CEO

# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000127083

Entity Name: ANGRY PRODUCTS, LLC

### **Current Principal Place of Business:**

18520 NW 67TH AVE #327 HIALEAH, FL 33015

# **Current Mailing Address:**

18520 NW 67TH AVE #327 HIALEAH, FL 33015 US

# FEI Number: 46-1148073

# Name and Address of Current Registered Agent:

TAX SPECIALIST SERVICES 11941 SW 17 CT MIRAMAR, FL 33025 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

### Authorized Person(s) Detail :

Title	MGR	Title	CEO
Name	MALLARD, LAWRENCE	Name	STEFANOS, LEONA Z
Address	4252 SW 126 AVE	Address	4252 SW 126TH AVE
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	MIRAMAR FL 33027

FILED Apr 29, 2016 Secretary of State CC1729240654

Certificate of Status Desired: No

04/29/2016

Date