

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000075752

**Entity Name:** MAVEN 360 LLC

**Current Principal Place of Business:**

1413 S. HOWARD AVE  
209  
TAMPA, FL 33606

**Current Mailing Address:**

PO BOX 7293  
TAMPA, FL 33606 US

**FEI Number:** 46-2871329

**Certificate of Status Desired:** No

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

COPPOLA, ANTHONY J  
1413 S HOWARD AVE  
209  
TAMPA, FL 33606 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 MGRM  
Name GORAB, JONATHAN  
Address PO BOX 7293  
City-State-Zip: TAMPA FL 33677

*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:** JONATHAN GORAB

MGRM

04/23/2014

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

\_\_\_\_\_  
Date