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

SIGNATURE: YASUSHI WATANABE

Electronic Signature of Signing Authorized Person(s) Detail

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	MGRM	Title	MGRM
Name	AOKI, KEVIN	Name	WATANABE, YASUSHI
Address	325 S. BISCAYNE BLVD., APT. 3919	Address	951 BRICKELL AVE
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L11000083677

Entity Name: DORAKU BRICKELL LLC

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

900 SOUTH MIAMI AVE SUITE 133 MIAMI, FL 33131

# **Current Mailing Address:**

900 SOUTH MIAMI AVE SUITE 133 MIAMI, FL 33131 US

#### FEI Number: 80-0743226

### Name and Address of Current Registered Agent:

AOKI, KEVIN 325 S. BISCAYNE BLVD APT 3919 MIAMI, FL 33131 US

FILED Mar 14, 2017 Secretary of State CC5991998110

Date

Certificate of Status Desired: No

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. 03/14/2017

MGRM

Date