that my name appears above, or on an attachment with all other like empowered. 04/28/2017 SIGNATURE: RAFAEL DE ARAUJO **AUTHORIZED** 

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: AKITA INVESTMENTS, LLC

DOCUMENT# L14000025497

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

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

C/O LAW OFFICE OF RAFAEL DE ARAUJO 1221 BRICKELL AVE STE 900 MIAMI, FL 33131

## **Current Mailing Address:**

C/O LAW OFFICE OF RAFAEL DE ARAUJO 1221 BRICKELL AVE STE 900 MIAMI, FL 33131 US

## FEI Number: NOT APPLICABLE

## Name and Address of Current Registered Agent:

LAW OFFICE OF RAFAEL DE ARAUJO 1221 BRICKELL AVENUE, SUITE 900 MIAMI, FL 33131 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	: RAFAEL DE ARAUJO		04/28/2017
	Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :			
Title	MGMR	Title	AUTHORIZED REPRESENTATIVE
Name	AKITA HOLDINGS, LTD	Name	DE ARAUJO, RAFAEL
Address	TRIDENT CHAMBERS, PO BOX 146	Address	1221 BRICKELL AVENUE, SUITE 900
City-State-Zip:	ROAD TOWN, TORTOLA, BVI OC 33131	City-State-Zip:	MIAMI FL 33131

Certificate of Status Desired: No

REPRESENTATIVE

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

FILED Apr 28, 2017 Secretary of State CC9062281402

Date