

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000247397

**Entity Name:** AKACHI LUV LLC

**Current Principal Place of Business:**

621733 POST OFFICE BLVD  
ORLANDO, FL 32862

**Current Mailing Address:**

621733 POST OFFICE BLVD  
ORLANDO, FL 32862 UN

**FEI Number:** 83-2183764

**Certificate of Status Desired:** No

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

WALKER, ADRAIN  
621733 POST OFFICE BLVD  
ORLANDO, FL 32862 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 P  
Name WALKER, ADRAIN  
Address 621733 POST OFFICE BLVD  
City-State-Zip: ORLANDO FL 32862

*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:** ADRAIN WALKER

P

04/26/2020

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

\_\_\_\_\_ Date