

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000075246

Entity Name: SKYWALKER ADVENTURES LLC

Current Principal Place of Business:

5590 NE TRIESTE WAY
BOCA RATON, FL 33487

Current Mailing Address:

5590 NE TRIESTE WAY
BOCA RATON, FL 33487 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST 4TH FLOOR
MIAMI, FL 33145 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	MGR	Title	MGR
Name	ZILINSKY, ALAN	Name	WALKER, CHRISTIAN J
Address	5590 NE TRIESTE WAY	Address	5590 NE TRIESTE WAY
City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	BOCA RATON FL 33487

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: ALAN ZILINSKY

MGR

04/30/2020

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date