

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000016729

**Entity Name:** OKIDOKI GROUP LLC

**Current Principal Place of Business:**

2020 NE 163RD STREET, SUITE 202 E  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

2020 NE 163RD STREET, SUITE 202 E  
NORTH MIAMI BEACH, FL 33162 US

**FEI Number:** 36-5007865

**Certificate of Status Desired:** No

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

ER, MEHMET  
2020 NE 163RD STREET, SUITE 202 E, NORTH  
MIAMI BEACH, FL 33162 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 AMBR  
Name ER, MEHMET  
Address 2020 NE 163RD STREET, SUITE 202 E,  
NORTH  
City-State-Zip: MIAMI BEACH FL 33162

Title MGR  
Name ER, EBRU  
Address 2020 NE 163RD STREET, SUITE 202 E,  
NORTH  
City-State-Zip: MIAMI BEACH FL 33162

Title MGR  
Name ER, OKAN  
Address 2020 NE 163RD STREET, SUITE 202 E,  
NORTH  
City-State-Zip: MIAMI BEACH FL 33162

*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:** MEHMET ER

AMBR

01/08/2024

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

\_\_\_\_\_  
Date