

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000046453

**Entity Name:** XCEPTIONAL HOSPITALITY RESOURCE, LLC

**Current Principal Place of Business:**

1640 WEST OAKLAND PARK BLVD  
SUITE #303  
FORT LAUDERDALE, FL 33311

**Current Mailing Address:**

1640 WEST OAKLAND PARK BLVD  
SUITE #303  
FORT LAUDERDALE, FL 33311

**FEI Number:** 83-3751714

**Certificate of Status Desired:** No

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

SAS PRINZIVALLI CPA P.A.  
1640 WEST OAKLAND PARK BLVD  
SUITE #303  
FORT LAUDERDALE, FL 33311 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            BOCHINO, JOHN  
Address        1640 WEST OAKLAND PARK BLVD  
City-State-Zip: SUITE #303 FL 33311

*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:** JOHN BOCHINO

AMBR

01/17/2020

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

\_\_\_\_\_  
Date