

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000246045

Entity Name: XHALE SMOKES LLC

Current Principal Place of Business:

3901 NW 79TH AVE SUITE 245 #2063
MIAMI, FL 33166

Current Mailing Address:

3901 NW 79TH AVE SUITE 245 #2063
MIAMI, FL 33166 US

FEI Number: 85-2663791

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SWISA, SALI
1130 NE 171 ST
MIAMI, 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 SWISA, SALI
Address 3901 NW 79TH AVE SUITE 245 #2063
City-State-Zip: MIAMI FL 33166

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: SALI SWISA

AMBR

04/28/2022

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date