

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000438018

Entity Name: ORLANDO HP LLC

Current Principal Place of Business:

217 N WESTMONTE DR
SUITE 3019
ALTAMONTE SPRINGS, FL 32714

Current Mailing Address:

PO BOX 16438
SAN JUAN, PR 00908 US

FEI Number: 92-0641798

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

100 HP MANAGEMENT LLC
217 N WESTMONTE DR
SUITE 3019
ALTAMONTE SPRINGS, FL 32714 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 BERNHARDT, ERIC
Address 241 LAZY ACRES LN
City-State-Zip: LONGWOOD FL 32750

Title AMBR
Name VALLENILLA VILLAFANE, JOSE R
Address CALLE VILLAMIL 1712
City-State-Zip: SAN JUAN PR 00907

Title AMBR
Name FIGUEROA, YAHAIRA
Address BUENA VISTA CALLE BELLA VISTA 28
City-State-Zip: CAYEY PR 00736

Title AR
Name CARBO DOMINGUEZ, JOSE A
Address K2 CALLE REYES LOPEZ
City-State-Zip: MANATI PR 00674

Title AMBR
Name 100 HP MANAGEMENT LLC
Address 217 N WESTMONTE DR SUITE 3019
City-State-Zip: ALTAMONTE SPRINGS FL 32714

Title AMBR
Name MARCANO, HECTOR
Address 215 SPRING LEAP CIRCLE
City-State-Zip: WINTER GARDEN FL 34787

Title MGR
Name HERNANDEZ, WANDA
Address 215 SPRING LEAP CIRCLE
City-State-Zip: WINTER GARDEN FL 34787

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: JOSE CARBO DOMINGUEZ

ACCOUNTANT

04/04/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date