bove named	entity submits this statement for the purpose of changing its regis	tered office or regis	tered age	ent, or both, in the State of Flor	ida.
NATURE:	MICHAEL MIRAGLIA				02/21/2023
	Electronic Signature of Registered Agent				Date
horized P	Person(s) Detail :				
	MGR	Title	MGR		
<u>م</u>	MIRAGUA MICHAEL	Namo		IEEE	

8135 SW 3	SUN	NYBRE	EZE RD
ARCADIA,	FL	34269	US

FEI Number: 86-2881766

Current Mailing Address:

Name and Address of Current Registered Agent:

MIRAGLIA, MICHAEL 6600 SW 114TH ST PINECREST, FL 33156 US

SIGN

Auth

Title	MGR	Title	MGR
Name	MIRAGLIA, MICHAEL	Name	NEAL, JEFF
Address	6600 SW 114TH ST	Address	630 LALIQUE CIR
City-State-Zip:	PINECREST 33156	City-State-Zip:	NAPLES FL 34119

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: MICHAEL MIRAGLIA

MGR

02/21/2023

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: Yes

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000143110

Entity Name: XUDE HOSPITALITY PARADISE, LLC

Current Principal Place of Business:

8135 SW SUNNYBREEZE RD ARCADIA, FL 34269