

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000219348

**Entity Name:** GRUPO HILDEPARME LLC

**Current Principal Place of Business:**

3625 NW 82ND AVE  
SUITE 318  
DORAL, FL 33166

**Current Mailing Address:**

3625 NW 82ND AVE  
SUITE 318  
DORAL, FL 33166 US

**FEI Number:** 86-3985486

**Certificate of Status Desired:** No

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

SACONSA GROUP LLC  
3625 NW 82ND AVE  
SUITE 100 K  
DORAL, FL 33166 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:** JESUS LEON

02/08/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name DE SIATI ASILDA, PATRICIA Y  
Address 3625 NW 82ND AVE  
SUITE 318  
City-State-Zip: DORAL FL 33166

Title AMBR  
Name HERNANDEZ MENDEZ, RODRIGO A  
Address 3625 NW 82ND AVE  
SUITE 318  
City-State-Zip: DORAL 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:** PATRICIA Y DE SIATI ASILDA

AMBR

02/08/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date