

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000040779

**Entity Name:** 1850 HOSPITALITY LLC

**Current Principal Place of Business:**

1850 W LANDSTREET RD  
ORLANDO, FL 32809

**Current Mailing Address:**

1850 W LANDSTREET RD  
ORLANDO, FL 32809

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PATEL, KUNAL  
1850 W LANDSTREET RD  
ORLANDO, FL 32809 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 MBR  
Name PATEL, KUNAL  
Address 1850 W LANDSTREET RD  
City-State-Zip: ORLANDO FL 32809

Title MBR  
Name PATEL, SATYAM  
Address 1850 W LANDSTREET RD  
City-State-Zip: ORLANDO FL 32809

Title MBR  
Name PATEL, SHIVAM  
Address 1850 W LANDSTREET RD  
City-State-Zip: ORLANDO FL 32809

Title MBR  
Name PATEL, NEEL  
Address 1850 W LANDSTREET RD  
City-State-Zip: ORLANDO FL 32809

Title MBR  
Name DESAI, KETANKUMAR  
Address 1850 W LANDSTREET RD  
City-State-Zip: ORLANDO FL 32809

Title MBR  
Name PATEL, AXAY  
Address 1850 W LANDSTREET RD  
City-State-Zip: ORLANDO FL 32809

*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:** SATYAM PATEL

**MEMBER**

**03/19/2024**

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

\_\_\_\_\_  
Date