

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000442780

**Entity Name:** KC HOSPITALITY LLC

**Current Principal Place of Business:**

5823 NE 2ND AVE  
MIAMI, FL 33137

**FILED**  
**Apr 24, 2025**  
**Secretary of State**  
**2158156081CC**

**Current Mailing Address:**

1035 N MIAMI AVE  
STE. 401  
MIAMI, FL 33136 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MACLEOD, CHRISTOPHER  
1035 N MIAMI AVE  
401  
MIAMI, FL 33136 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	MGRM	Title	AMBR
Name	MACLEOD, CHRISTOPHER	Name	WESSEL, KRISTEN
Address	2430 INAGUA AVE	Address	828 NW 9TH AVE
City-State-Zip:	MIAMI FL 33133	City-State-Zip:	MIAMI FL 33136

*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:** CHRISTOPHER MACLEOD

**MANAGING MEMBER**

**04/24/2025**

Electronic Signature of Signing Authorized Person(s) Detail

Date