

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000331710

Entity Name: ONE LOVE SECURED LLC

Current Principal Place of Business:

925 E. MAGNOLIA DR. APT H7
TALLAHASSEE, FL 32301

Current Mailing Address:

925 E. MAGNOLIA DR. APT H7
TALLAHASSEE, FL 32301 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKIPPER, COREY
925 E. MAGNOLIA DR. APT H7
TALLAHASSEE, FL 32301 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 SKIPPER, COREY
Address 925 E. MAGNOLIA DR. APT H7
City-State-Zip: TALLAHASSEE FL 32301

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: COREY SKIPPER

AMBR

04/25/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date