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: BRAVO G BROWN

Electronic Signature of Signing Authorized Person(s) Detail

da.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR	Title	AP
Name	BROWN, BRAVO	Name	BROWN, SHAHAINE
Address	349 THOMAS DRIVE	Address	349 THOMAS DRIVE
City-State-Zip:	QUINCY FL 32352	City-State-Zip:	QUINCY FL 32352

The above named entity submits this statement for	or the purpose of changing its regis	stered office or registered agent, o	or both, in the State of Florida

DOCUMENT# L19000012399

Entity Name: ONE LOVE HOSPITALITY AND LANDSCAPE SERVICES LLC

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

Current Principal Place of Business:

349 THOMAS DRIVE QUINCY, FL 32352

Current Mailing Address:

349 THOMAS DRIVE QUINCY, FL 32352

FEI Number: 83-4091900

Name and Address of Current Registered Agent:

BROWN, BRAVO 349 THOMAS DR QUINCY, FL 32352 US Certificate of Status Desired: Yes

OWNER/MANAGER

06/30/2020

FILED Jun 30, 2020 Secretary of State 7836364469CC

Date

Date