#### Electronic Signature of Signing Officer/Director Detail

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N0500009033

Entity Name: ONE MIAMI MASTER ASSOCIATION, INC.

# Current Principal Place of Business:

335 SOUTH BISCAYNE BLVD, SUITE 200 MIAMI, FL 33131

# **Current Mailing Address:**

335 SOUTH BISCAYNE BLVD, SUITE 200 MIAMI, FL 33131 US

#### FEI Number: 20-3453985

# Name and Address of Current Registered Agent:

SKRLD, INC. 201 ALHAMBRA CIRCLE, 11TH FLOOR CORAL GABLES, FL 33134 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: GARY MARS, ESQ.				09/29/2023
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	DIRECTOR	Title	VICE PRESIDENT	
Name	DREWLO, NORMAN	Name	MAGID, MARC	
Address	335 SOUTH BISCAYNE BLVD, SUITE 200	Address	335 SOUTH BISCAYNE BLVD, SUITE 200	
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
Title	PRESIDENT	Title	SECRETARY	
Name	LASICKI, JOSEPH	Name	WHITE, MICHELE	
Address	335 SOUTH BISCAYNE BLVD, SUITE 200	Address	335 SOUTH BISCAYNE BLVD, SUITE 200	
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131	
Title	TREASURER			
Name	GARCIA, YOVANI			
Address	335 SOUTH BISCAYNE BLVD, SUITE 200			
City-State-Zip:	MIAMI FL 33131			

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

09/29/2023

FILED Sep 29, 2023 Secretary of State 5664466731CC

Certificate of Status Desired: No

Date