

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000204287

**Entity Name:** ONE VIBE, LLC

**Current Principal Place of Business:**

1415 W. OAK STREET #422852  
KISSIMMEE, FL 34742

**Current Mailing Address:**

PO BOX 422852  
KISSIMMEE, FL 34742

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

FORRESTER, SHAUNITA  
1415 W. OAK STREET #422852  
KISSIMMEE, FL 34742 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            CEO/PRESIDENT  
Name            FORRESTER, SHAUNITA  
Address        PO BOX 422852  
City-State-Zip: KISSIMMEE FL 34742

*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:** SHAUNITA INEZ FORRESTER

CEO/PRESIDENT

03/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date