

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000494027

Entity Name: LOVE INSURANCE FINANCE EVERYTHING ELSE LLC

Current Principal Place of Business:

15239 NIGHT HERON DR
WINTER GARDEN, FL 34787

Current Mailing Address:

15239 NIGHT HERON DR
WINTER GARDEN, FL 34787

FEI Number: 88-0664862

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KONATE FAMILY ENTERPRISES LLC
15239 NIGHT HERON DR
WINTER GARDEN, FL 34787 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 COO
Name KONATE, LEIGHANN
Address 15239 NIGHT HERON DR
City-State-Zip: WINTER GARDEN FL 34787

Title CEO
Name KONATE, MOHAMED
Address 15239 NIGHT HERON DR
City-State-Zip: WINTER GARDEN FL 34787

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: LEIGHANN KONATE

COO

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date