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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MARK J. WILHELM

Electronic Signature of Signing General Partner Detail

City-State-Zip: BOCA RATON FL 33429

01/18/2023 **GENERAL PARTNER**

Current Mailing Address:

PO BOX 1853 BOCA RATON, FL 33429 US

City-State-Zip: BOCA RATON FL 33429

FEI Number: 46-1578985

Name and Address of Current Registered Agent:

WILHELM, MICHAEL J. 980 N FEDERAL HWY SUITE 303 BOCA RATON, FL 33432 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	: MICHAEL J. WILHELM			01/18/2023
	Electronic Signature of Registered Agent			Date
General Partner Detail :				
Document #		Document #		
Name	WILHELM, MARK J	Name	WILHELM, AMY H	
Address	PO BOX 1853	Address	PO BOX 1853	

SIGNATURE MICHAEL I WILHELM

2023 FLORIDA LIMITED PARTNERSHIP ANNUAL REPORT

DOCUMENT# A1200000873

Entity Name: WILHELM FLORIDA, LLLP

Current Principal Place of Business:

980 N FEDERAL HWY SUITE 303 BOCA RATON, FL 33432

Jan 18, 2023 Secretary of State 3429694104CC

Certificate of Status Desired: No

FILED

Date