

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000138232

**Entity Name:** WILLOVER LLC

**Current Principal Place of Business:**

1221 SOUTH PALMWAY  
LAKE WORTH, FL 33460

**Current Mailing Address:**

1221 SOUTH PALMWAY  
LAKE WORTH, FL 33460 US

**FEI Number:** 81-3354289

**Certificate of Status Desired:** No

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

KAUFMAN, DAVID M  
1221 SOUTH PALMWAY  
LAKE WORTH, FL 33460 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 AMBR  
Name KAUFMAN, DAVID  
Address 1221 SOUTH PALMWAY  
City-State-Zip: LAKE WORTH FL 33460

Title AMBR  
Name JACOBSON, ELIZABETH  
Address 1670A UPPER CANYON ROAD  
City-State-Zip: SANTA FE NM 87501

Title AMBR  
Name KAUFMAN, WILLA  
Address 1221 SOUTH PALMWAY  
City-State-Zip: LAKE WORTH FL 33460

Title AMBR  
Name KAUFMAN, OLIVER  
Address 1221 SOUTH PALMWAY  
City-State-Zip: LAKE WORTH FL 33460

*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:** DAVID KAUFMAN

**MEMBER**

**02/06/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date