

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000073606

**Entity Name:** CASSINI RENTALS,LLC

**Current Principal Place of Business:**

6424 NW 85TH TERRACE  
GAINESVILLE, FL 32653

**Current Mailing Address:**

6424 NW 85TH TERRACE  
GAINESVILLE, FL 32653

**FEI Number:** 46-1238847

**Certificate of Status Desired:** No

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

WINIKOR, ISRAEL  
6424 NW 85TH TERRACE  
GAINESVILLE, FL 32653 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 MGR, AUTHORIZED MEMBER  
Name WINIKOR, NANCY C  
Address 6424 NW 85TH TERRACE  
City-State-Zip: GAINESVILLE FL 32653

Title AUTHORIZED MEMBER  
Name WINIKOR, ISRAEL DR.  
Address 6424 NW 85TH TERRACE  
City-State-Zip: GAINESVILLE FL 32653

*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:** ISRAEL WINIKOR

**MANAGER**

**02/01/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date