

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000045148

**Entity Name:** FLORIDA PORTABLES LLC

**Current Principal Place of Business:**

2418 ATLANTIC CIRCLE  
LEHIGH ACRES, FL 33936

**Current Mailing Address:**

PO BOX 151173  
CAPE CORAL, FL 33915 US

**FEI Number:** 83-3698909

**Certificate of Status Desired:** No

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

VASS, JON  
2418 ATLANTIC CIRCLE  
LEHIGH ACRES, FL 33936 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 VICE PRESIDENT

Name VASS, JON M

Address 2418 ATLANTIC CIRCLE

City-State-Zip: LEHIGH ACRES FL 33936

Title PRESIDENT

Name SASO, ANTHONY C

Address 3332 SE 17TH PL

City-State-Zip: CAPE CORAL FL 33904

*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:** ANTHONY SASO

**PRESIDENT**

**03/31/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date