

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000226438

**Entity Name:** FORTUNA 888, LLC.

**Current Principal Place of Business:**

449 18TH AVENUE  
INDIAN ROCKS BEACH, FL 33785

**Current Mailing Address:**

449 18TH AVENUE  
INDIAN ROCKS BEACH, FL 33785 US

**FEI Number:** 83-2032135

**Certificate of Status Desired:** No

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

ARSENAULT, KENNETH G JR.  
19535 GULF BLVD  
SUITE E  
INDIAN ROCKS BEACH, FL 33785 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                         | Title           | MANAGER                     |
| Name            | ASSINI, VINCENT             | Name            | ASSINI, RHONDI              |
| Address         | 449 18TH AVENUE             | Address         | 449 18TH AVE                |
| City-State-Zip: | INDIAN ROCKS BEACH FL 33785 | City-State-Zip: | INDIAN ROCKS BEACH FL 33785 |

*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:** VINCENT PAUL ASSINI

**MANAGER**

**01/09/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date