

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000045148

Entity Name: FLORIDA PORTABLES LLC

Current Principal Place of Business:

20120 CAMPBELL RD N
NORTH FORT MYERS, FL 33917

Current Mailing Address:

PO BOX 3525
NORTH FORT MYERS, FL 33918 US

FEI Number: 83-3698909

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VASS, JON
20120 CAMPBELL RD.
NORTH FORT MYERS, FL 33917 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: JON VASS

01/11/2024

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	VP	Title	PRESIDENT
Name	VASS, JON M	Name	SASO, ANTHONY C
Address	4145 MADISON ST	Address	20120 CAMPBELL RD N
City-State-Zip:	AVA MARIA FL 34142	City-State-Zip:	NORTH FORT MYERS FL 33917
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Name	ROBERTS, MAGEN	Name	SASO, LISA
Address	PO BOX 100517	Address	18550 MARLIN KITE LN
City-State-Zip:	CAPE CORAL FL 33910	City-State-Zip:	NORTH FORT MYERS FL 33917

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: JON M VASS

VP

01/11/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date