

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000119811

**Entity Name:** 6 WITHAVIEW LLC

**Current Principal Place of Business:**

5750 COLLINS AVE #8E  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

C/O VITERI FINANCIAL CORPORATION  
6721 SW 69 TERRACE  
MIAMI, FL 33143 US

**FEI Number:** 99-0370148

**Certificate of Status Desired:** No

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

VITERI FINANCIAL CORPORATION  
6721 SW 69 TERRACE  
MIAMI, FL 33143 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 MGRM  
Name GABELL, PER  
Address 5750 COLLINS AVE #8E  
City-State-Zip: MIAMI BEACH FL 33143

Title MGRM  
Name GABELL, HELENA  
Address 5750 COLLINS AVE #8E  
City-State-Zip: MIAMI BEACH FL 33143

*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:** PER GABELL

**MANAGER**

**03/02/2024**

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

\_\_\_\_\_  
Date