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: TERRI TAGLIARINI

Electronic Signature of Signing Authorized Person(s) Detail

Current Principal Place of Business: 831 ARTHUR MOORE DRIVE GREEN COVE SPRINGS, FL 32043

Entity Name: BELLA COASTAL VIEW, LLC

Current Mailing Address:

DOCUMENT# L15000031825

831 ARTHUR MOORE DRIVE GREEN COVE SPRINGS. FL 32043 US

FEI Number: 82-0726358

Name and Address of Current Registered Agent:

RIVER CPA LLC 1547 PETERS CREEK ROAD GREEN COVE SPRINGS, FL 32043 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

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	TAGLIARINI, DAVID A	Name	TAGLIARINI, TERRI
Address	831 ARTHUR MOORE DRIVE	Address	831 ARTHUR MOORE DRIVE
City-State-Zip:	GREEN COVE SPRINGS FL 32043	City-State-Zip:	GREEN COVE SPRINGS FL 32043

02/19/2024

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Feb 19, 2024 Secretary of State 3044080444CC

Certificate of Status Desired: No

Date

Date

MGRM