

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000218868

**Entity Name:** MY VITAL VIEW, LLC

**Current Principal Place of Business:**

2194 HIGHWAY A1A  
STE 107  
INDN HBR BCH, FL 32937

**Current Mailing Address:**

1925 RIVER SHORE DRIVE  
INDIALANTIC, FL 32903 US

**FEI Number:** 84-2859351

**Certificate of Status Desired:** No

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

BEIRNE, DANIEL  
1925 RIVER SHORE DRIVE  
INDIALANTIC, FL 32903 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  
Name BEIRNE, DANIEL  
Address 1925 RIVER SHORE DRIVE  
City-State-Zip: INDIALANTIC FL 32903

*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:** DANIEL K BEIRNE

ADMIN

01/10/2023

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

\_\_\_\_\_ Date