#### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L20000388127

Entity Name: LUNAVYSTA, LLC

May 01, 2024 Secretary of State 7793872592CC

**FILED** 

## **Current Principal Place of Business:**

581 N PARK AVE 2105

APOPKA, FL 32704

### **Current Mailing Address:**

PO BOX 2105

APOPKA, FL 32704 US

FEI Number: 85-4344651 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

LUNA, GUS 581 N PARK AVE 2105 APOPKA, FL 32704 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: GUS LUNA 05/01/2024

Electronic Signature of Registered Agent Date

# Authorized Person(s) Detail:

Title MGR

Name LUNA, GUS
Address 581 N PARK AVE

SIGNATURE: GUS LUNA

City-State-Zip: APOPKA FL 32704

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.

**MGR**