

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000366138

**Entity Name:** VISTA IMARK LLC

**Current Principal Place of Business:**

391 SOFIA LN  
LAKE ALFRED, FL 33850

**Current Mailing Address:**

391 SOFIA LN  
LAKE ALFRED, FL 33850

**FEI Number:** 35-2770446

**Certificate of Status Desired:** Yes

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

BG5 REGISTERED AGENT CO.  
2711 NW 104TH AV  
UNIT 303  
SUNRISE, FL 33322 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            AMBR  
Name            IMARKLAND LLC  
Address        391 SOFIA LN  
City-State-Zip: LAKE ALFRED FL 33850

Title            AMBR  
Name            VISTA POLARIS LLC  
Address        391 SOFIA LN  
City-State-Zip: LAKE ALFRED FL 33850

Title            AMBR  
Name            VISTA PEGASUS LLC  
Address        391 SOFIA LN  
City-State-Zip: LAKE ALFRED FL 33850

*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:** LEILA SABAT

AMBR

03/02/2023

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

\_\_\_\_\_  
Date