

# **2014 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L12000101366

Entity Name: BELLA VISTA 5, LLC

**FILED**  
**Oct 09, 2014**  
**Secretary of State**

**Current Principal Place of Business:**

18 BELLA VISTA AVE  
LAKE WORTH, FL 33460

**New Principal Place of Business:**

**Current Mailing Address:**

18 BELLA VISTA AVE  
LAKE WORTH, FL 33460

**New Mailing Address:**

FEI Number: 47-2043417

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SMITH, PETER R  
18 BELLA VISTA AVE  
LAKE WORTH, FL 33460 US

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

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: PETER R SMITH

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**AUTHORIZED PERSONS:**

Title: MGRM  
Name: SMITH, PETER R  
Address: 18 BELLA VISTA AVE  
City-St-Zip: LAKE WORTH, FL 33460

Title: MGRM  
Name: SMITH, JOY I  
Address: 18 BELLA VISTA AVE  
City-St-Zip: LAKE WORTH, FL 33460

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am authorized to execute this report as required by Chapter 605, Florida Statutes.

SIGNATURE: PETER R SMITH

MGRM

10/09/2014

\_\_\_\_\_  
Electronic Signature of Authorized Person

\_\_\_\_\_  
Date