

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000318276

**Entity Name:** ALLY VISTA, LLC

**Current Principal Place of Business:**

1211 NORTH WESTSHORE BOULEVARD  
SUITE 800  
TAMPA, FL 33607

**Current Mailing Address:**

1211 NORTH WESTSHORE BOULEVARD  
SUITE 800  
TAMPA, FL 33607 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

LEGALINC CORPORATE SERVICES INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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           MANAGER  
Name           ALLY CAPITAL GROUP REAL ESTATE  
                  OPPORTUNITY FUND I GP, LLC  
Address        1311 N WESTSHORE BLVD  
                  STE 200  
City-State-Zip: TAMPA FL 33607

*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:** ANDREW WRIGHT

**MEMBER**

**04/13/2023**

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

\_\_\_\_\_ Date