

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000051664

Entity Name: QUIVIVE, LLC

Current Principal Place of Business:

870 N HIGHWAY A1A,
STE 325
INDIALANTIC, FL 32903-3054

Current Mailing Address:

870 N HIGHWAY A1A,
STE 325
INDIALANTIC, FL 32903-3054 US

FEI Number: 36-4697210

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ORMESHER, JOHN
870 N HWY A1A
325
INDIALANTIC, FL 329033054 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 MGRM
Name ORMESHER, JOHN
Address 870 N HIGHWAY A1A,
STE 325
City-State-Zip: INDIALANTIC FL 32903-3054

Title MGRM
Name ORMESHER, KRISTIN
Address 870 N HIGHWAY A1A,
STE 325
City-State-Zip: INDIALANTIC FL 32903-3054

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: JOHN ORMESHER

MANAGING MEMBER

04/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date