

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000008161

Entity Name: REVIVAL REHAB FITNESS AND WELLNESS L.L.C.

Current Principal Place of Business:

197 3RD ST EAST
NOKOMIS, FL 34275

Current Mailing Address:

197 3RD ST EAST
NOKOMIS, FL 34275 US

FEI Number: 81-5011186

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GINALSKI, KARL
197 3RD ST EAST
NOKOMIS, FL 34275 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 PRESIDENT
Name GINALSKI, KARL
Address 197 3RD ST EAST
City-State-Zip: NOKOMIS FL 34275

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: KARL GINALSKI

OWNER

04/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date