

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000209664

**FILED**  
**Jun 17, 2020**  
**Secretary of State**  
**6123552464CC**

**Entity Name:** REV PORT CHARLOTTE LLC

**Current Principal Place of Business:**

2203 NE 123RD ST  
NORTH MIAMI, FL 33181

**Current Mailing Address:**

2203 NE 123RD ST  
NORTH MIAMI, FL 33181 US

**FEI Number:** 32-0608839

**Certificate of Status Desired:** No

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

RAYNARD, JULIEN  
2203 NE 123RD ST  
NORTH MIAMI, FL 33181 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 MGR  
Name REVAH, ALAIN  
Address 2531 NE 199TH ST  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name REVAH, NATHALIE  
Address 2531 NE 199TH ST  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name REVAH, RUBEN  
Address 2531 NE 199TH ST  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name REVAH, SACHA  
Address 2531 NE 199TH ST  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name REVAH, KAREN  
Address 2531 NE 199TH ST  
City-State-Zip: MIAMI FL 33180

Title MGR  
Name REVAH, NOEMI  
Address 2531 NE 199TH ST  
City-State-Zip: MIAMI FL 33180

*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:** ALAIN REVAH

**MGR**

**06/17/2020**

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

\_\_\_\_\_  
Date