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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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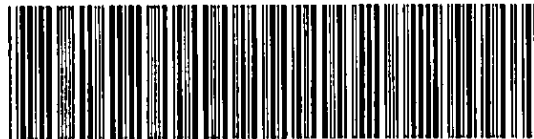
(Business Entity Name)

(Document Number)

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October 14, 2022

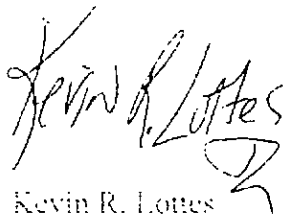
New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe St., Suite 310
Tallahassee, FL 32303

Re: REVIVE TOTAL WELLNESS, LLC
Document No. W22066127322
Filing Date: 10/10/22

Dear Sir/Madam:

This new LLC filing was rejected for incomplete or illegible registered agent information. This has been corrected and we are resubmitting. The filing fee has previously been paid. Please note that the company does show up on the website, but the name is misspelled. It should be WELLNESS not Wellness. I trust everything is now in order. Thank you.

Very truly yours,



Kevin R. Lottes

KRL/ah

COPY (of original)

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Revive Total Wellness, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kevin R. Lottes, Esq.

Name of Person

Lottes Law Group, PLLC

Firm/Company

9132 Strada Place, Suite 207

Address

Naples, FL 34108

City/State and Zip Code

shawnhedegus@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kevin R. Lottes 239 552-4114
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION
OF
REVIVE TOTAL WELLNESS, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I -- NAME

The name of the limited liability company shall be Revive Total Wellness, LLC ("Company").

ARTICLE II -- ADDRESS

The mailing address of the initial principal office of the Company shall be 4019 Santa Barbara Boulevard, Naples, FL 34104. The street address of the initial principal office of the Company shall be 4019 Santa Barbara Boulevard, Naples, FL 34104.

ARTICLE III -- DURATION

The Company shall commence its existence on the date these articles of organization are filed by the Florida Department of State. The Company's existence shall be perpetual unless the Company is earlier dissolved as provided in these articles of organization or in the Company's operating agreement.

ARTICLE IV -- REGISTERED OFFICE AND AGENT

The name and street address of the initial registered agent of the Company in the State of Florida is Shawn Hegedus, with a street address of 870 Charlemagne Boulevard, Naples, FL 34112.

ARTICLE V -- ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the Company except such terms and conditions as are set forth in the Operating Agreement of the Company. A member may transfer its interest in the Company only as set forth in the Operating Agreement of the Company.

ARTICLE VI -- WITHDRAWAL OF MEMBERS

A member of the Company may withdraw from the Company only upon such terms are set forth in the Operating Agreement of the Company.

ARTICLE VII -- TERMINATION OF EXISTENCE

The Company shall be dissolved upon the occurrence of events specified in the Company's Operating Agreement.

ARTICLE VIII -- MANAGEMENT

The Company shall be managed by one or more Managers in accordance with the Operating Agreement adopted by the members for the management of the business and affairs of the Company. The original and sole Managers of the Company shall be Michelle Ham and Shawn Hegedus. The Operating Agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these articles of organization. Mailing Address: 870 Charelemagne Blvd., Naples, FL 34112.

IN WITNESS WHEREOF, the undersigned organizer has made and subscribed these articles of organization at Naples, Florida, on this 23 day of September, 2022.



Michelle Ham, Manager



Shawn Hegedus, Manager

ACCEPTANCE OF REGISTERED AGENTp

The undersigned, being the person named in the articles of organization of Revive Total Wellness, LLC, as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated company at the place designated in the articles of organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accept the obligations of the position of registered agent.

Date: September 23, 2022



Shawn Hegedus