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COVER LETTER

Registration Section
Division of Corporations

SUBJECT: Reviv Management, LLC
Name of Limited Liability Company

Enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of
Filing, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Blythe Meeker

Name of Person

Reviv Management, LLC

Firm/Company

11201 N Tatum Blvd Suite 300

Address

Phoenix, AZ 85028

City/State and Zip Code

bmeeker@revivme.com

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

For further information concerning this matter, please call:

Blythe Meeker at (602) 388-8042
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

Aviv Management, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

If unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC."

Arizona
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-5524713
(FEI number, if applicable)

January 1, 2023
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

601 Washington Ave
(Address of Principal Office)

6. 11201 N Tatum Blvd
(Mailing Address)

112

Suite 300

Miami Beach, FL 33139

Phoenix, AZ 85028

Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

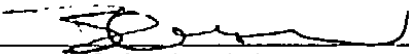
Name: Incorp Services, INC

Office Address: 17888 67th CT North

Loxahatchee, Florida 33470
(City) (Zip code)

Registered agent's acceptance:

I have been named as registered agent and to accept service of process for the above stated limited liability company at the place stated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to sign [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
Manager	Name: <u>Johnny Parvani</u>	<input type="checkbox"/> Manager	Name: <u>German Kaupert</u>
Member	Address: <u>11201 N Tatum Blvd</u>	<input checked="" type="checkbox"/> Member	Address: <u>201 Crandon Blvd</u>
Authorized	<u>Suite 300</u>	<input type="checkbox"/> Authorized	<u>#164</u>
Person	<u>Phoenix, AZ 85028</u>	Person	<u>Key Biscayne, FL 33149</u>
Other	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____


Manager	Name: <u>Raanan Pokroy</u>	<input type="checkbox"/> Manager	Name: _____
Member	Address: <u>9788 Newport Coast Cir</u>	<input type="checkbox"/> Member	Address: _____
Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	<u>Las Vegas, NV 89147</u>	Person	_____
Other	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Manager	Name: <u>Blythe Meeker</u>	<input type="checkbox"/> Manager	Name: _____
Member	Address: <u>11201 N Tatum Blvd</u>	<input type="checkbox"/> Member	Address: _____
Authorized	<u>Suite 300</u>	<input type="checkbox"/> Authorized	_____
Person	<u>Phoenix, AZ 85028</u>	Person	_____
Other	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-attached individuals may be added to the index when filing your Florida Department of State Annual Report form.

Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath and a translator must be submitted)

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information furnished in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person

Blythe Meeker

STATE OF ARIZONA



Office of the CORPORATION COMMISSION

CERTIFICATE OF GOOD STANDING

I, the undersigned Executive Director of the Arizona Corporation Commission, do hereby certify that:

REVIV MANAGEMENT, LLC

ACC file number: 1.20420847

was incorporated under the laws of the State of Arizona on 10/20/2015, and that, according to the records of the Arizona Corporation Commission, said limited liability company is in good standing in the State of Arizona as of the date this Certificate is issued.

This Certificate relates only to the legal existence of the above named entity as of the date this Certificate is issued, and is not an endorsement, recommendation, or approval of the entity's condition, business activities, affairs, or practices.

IN WITNESS WHEREOF, I have hereunto set my hand, affixed the official seal of the Arizona Corporation Commission, and issued this Certificate on this date: 12/28/2022



A handwritten signature in black ink, reading "Matthew Neubert", written over a horizontal line.

Matthew Neubert, Executive Director