P19000047387

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COVER LETTER

TO: Amendment Section Division of Corporations

KEVIVE HEAL	IH CENTER, INC	
NAME OF CORPORATION:		
P19000047387	•	
DOCUMENT NUMBER:		
The enclosed Articles of Revocation of Dissolut	tion and fee are submitted	l for filing.
Please return all correspondence concerning this	matter to the following:	
AARON MICHAEL FRIEDEBERG		
Name of	Contact Person	
REVIVE HEALTH CENTER, INC		
Firm	/Company	
1011 IVES DAIRY ROAD, SUITE 107		
A	Address	
NORTH MIAMI BEACH, FL 33179		
City/State	e and Zip Code	
E-mail address: (to be used for	or future annual report notification	ation)
For further information concerning this matter, p	olease call:	
AARON MICHAEL FRIEDEBERG	305 772-0)313
	At ()	
Name of Contact Person	Area Code & Dayti	me Telephone Number
Enclosed is a check for the following amount:		
	 S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) 	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address:	Street Address	

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

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

ARTICLES OF REVOCATION OF DISSOLUTION

Pursuant to section 607.1404, Florida Statutes, this Florida profit corporation revokes its Articles of Dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the Articles of Dissolution:

	REVIVE HEALTH CENTER, INC		
FIRST:	The name of the corporation is:		
	P19000047387		
SECOND:	The document number of the corporation (if known) is		
THIRD:	The effective date (or file date, if no effective date) of the Articles of Dissolution 01/13/2021		
	filed with the Florida Department of State is		
	Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi not be listed as the document's effective date on the Department of State's records. 05/12/21		
FOURTH:	The Revocation of Dissolution was authorized on		
FIFTH:	Adoption of Revocation of Dissolution (check one)		
	 ☑ The board of directors/incorporation revoked the dissolution. ☐ The board of directors revoked the dissolution authorized by the shareholders and revocation was permitted by action by the board of directors alone pursuant to that authorization. ☐ The shareholders revoked the dissolution and was authorized by the shareholders in the manner required by this chapter and by the articles of incorporation. 		
SIXTH:	A copy of the Articles of Dissolution is attached.		
	Signature 5/12/2021		
	(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary. by that fiduciary) AARON MICHAEL FRIEDEBERG (Typed or printed name of person signing) PRESIDENT/CEO (Title of person signing)		
	(Typed or printed name of person signing)		
	PRESIDENT/CEO		
	(Title of person signing)		

FILING FEE \$35

FILED Jan 13, 2021 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 607.1401, Florida Statutes, this Florida corporation submits the following Articles of Dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

REVIVE HEALTH CENTER, INC

SECOND: The document number of the corporation: P19000047387

THIRD: The file date of the articles of incorporation: June 3, 2019

FOURTH: None of the corporation's shares have been issued.

FIFTH: No debt of the corporation remains unpaid.

SIXTH: The net assets of the corporation remaining after winding up, if any, have been distributed.

SEVENTH: A majority of the incorporators or directors authorized the dissolution.

I submit this document and affirm that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: ANTONIO ALVAREZ PRESIDENT

Electronic Signature of Signing Officer, Director, Incorporator or Authorized Representative