

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000000082

**Entity Name:** REVITAGE, LLC

**Current Principal Place of Business:**

ALTAMONTE SPRINGS  
PO BOX 150035  
ALTAMONTE SPRINGS, FL 32715

**Current Mailing Address:**

ALTAMONTE SPRINGS  
PO BOX 150035  
ALTAMONTE SPRINGS, FL 32715 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

REVITAGE LLC  
ALTAMONTE SPRINGS  
PO BOX 150035  
ALTAMONTE SPRINGS, FL 32715 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:** REVITAGE

02/14/2024

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name NIJSSEN, ANGELIQUE  
Address ALTAMONTE SPRINGS  
PO BOX 150035  
City-State-Zip: ALTAMONTE SPRINGS FL 32715

Title MGR  
Name BRUINHOF, MARC  
Address ALTAMONTE SPRINGS  
PO BOX 150035  
City-State-Zip: ALTAMONTE SPRINGS FL 32715

*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:** BRUINHOF MARC

MGR

02/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date