

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000400541

Entity Name: REVIVE HYDRATION THERAPY AND WELLNESS LLC

Current Principal Place of Business:

3709 W JETTON AVE STE A1
TAMPA, FL 33629

Current Mailing Address:

3709 W JETTON AVE STE A1
TAMPA, FL 33629 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC
7901 4TH ST. N STE 300
ST. PETERSBURG, FL 33702 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 BRADLEY, SIDNEY
Address 3615 W GRANADA ST
City-State-Zip: TAMPA FL 33629

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: SIDNEY BRADLEY

CEO

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date