# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000489173

Entity Name: REVIVE HYDRATION AND WELLNESS SPA LLC

FILED
Apr 18, 2024
Secretary of State
8810701546CC

# **Current Principal Place of Business:**

5337 NORTH SOCRUM LOOP ROAD

222

LAKELAND, FL 33809

# **Current Mailing Address:**

5337 N SOCRUM LOOP RD 222 LAKELAND, FL 33809

FEI Number: 92-1085081 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

CLARK, LESHANA 5337 N SOCRUM LOOP RD 222 LAKELAND, FL 33809 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 CEO

Name CLARK, LESHANA

Address 5337 SOCRUM LOOP RD

222

City-State-Zip: LAKELAND FL 33809

SIGNATURE: CLARK, LESHANA

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.

CEO

Electronic Signature of Signing Authorized Person(s) Detail

04/18/2024

Date