

**2023 FOREIGN NOT FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# F17000003723

**FILED**  
**Dec 12, 2023**  
**Secretary of State**  
**8671613503CR**

**Entity Name:** ASOCIACION PROVIDA DE VENEZUELA - PROVIVE INCORPORATED

**Current Principal Place of Business:**

2427 PRESIDENTIAL WAY  
602  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

2427 PRESIDENTIAL WAY, UNIT 602  
WEST PALM BEACH, FL 33401 US

**FEI Number: 98-0136863**

**Certificate of Status Desired: No**

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

OLAVARRIA, MARIAN  
2427 PRESIDENTIAL WAY, UNIT 602  
WEST PALM BEACH, FL 33401 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: MARIAN OLAVARRIA**

**12/12/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            VOLLMER, CHRISTINE  
Address        CALLE SUR 1  
                  QUINTA EL CARMEN URBANIZACION  
                  EL PLACER  
City-State-Zip: CARACAS MIRANDA

Title            MEMBER  
Name            PALACIOS, ALVARO IGNACIO  
Address        CALLE EL GAMELOTAL,  
                  RESIDENCIAS GINA  
                  URBANIZACION LA ESMERALDA  
                  PH-2B  
City-State-Zip: CARACAS

Title            MEMBER  
Name            PERELLA, JOSE ANTONIO  
Address        BAJADA DE LOS CURTIDORES,  
                  RAMAL 1  
                  QUINTA PORTO FINO URBANIZACION  
                  ALTO HATILLO  
City-State-Zip: CARACAS

Title            MEMBER  
Name            AGUILAR, CARLOS IGNACIO  
Address        452 RIDGEWOOD AV  
City-State-Zip: KEY BISCAZYNE FL 33149

Title            SECRETARY  
Name            HERRERA RAMIREZ, JORGE ANTONIO  
Address        CALLE GUAICAIPURO  
                  EDIF. ASKAIN, PISO 1 L-1  
City-State-Zip: CARACAS MIRANDA

Title            COMPTROLLER  
Name            DE FARIAS DE GOES, MARLENE  
Address        CONTALFA  
                  AVENIDA MARA C. C. MACARACUAY  
City-State-Zip: CARACAS MIRANDA

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: CHRISTINE VOLLMER**

**PRESIDENT**

**12/12/2023**

Electronic Signature of Signing Officer/Director Detail

Date