

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000060897

Entity Name: SEVERE INCIDENT RECOVERY TEAM, LLC

Current Principal Place of Business:

2385 SW 66 TERRACE
DAVIE, FL 33317

Current Mailing Address:

2385 SW 66 TERRACE
DAVIE, FL 33317 US

FEI Number: 26-0628484

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
515 E. PARK AVE., 2ND FL
TALLAHASSEE, FL 32301 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 MGMR
Name A SUPERIOR TOWING, INC.
Address 2385 SW 66 TERRACE
City-State-Zip: DAVIE FL 33317

Title MGR
Name KAUFF'S OF MIAMI, INC.
Address 4701 EAST AVE
City-State-Zip: W PALM BEACH FL 33407

Title MGR
Name EMERALD TRANSPORTATION CORPORATION
Address 4000 N POWERLINE RD
City-State-Zip: POMPANO BEACH FL 33073

Title CFO
Name GUNTER, ROCKY
Address 4701 EAST AVENUE
City-State-Zip: WEST PALM BEACH FL 33407

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: ROCKY GUNTER

CFO

03/15/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date