

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000036971

Entity Name: ANGEL 1 AIR AMBULANCE,LLC

Current Principal Place of Business:

1451 W.CYPRESS CREEK ROAD
SUITE 300
FORT LUADERDALE, FL 33309

Current Mailing Address:

1451 W.CYPRESS CREEK ROAD
SUITE 300
FORT LUADERDALE, FL 33309 US

FEI Number: APPLIED FOR

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PAUL, NADINE
1451 W.CYPRESS CREEK ROAD
SUITE 300
FORT LUADERDALE, FL 33309 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 SKEPPLE, DEXTER
Address P.O.BOX 4688
City-State-Zip: KINGSHILL VI 00851

Title MGRM
Name ARNOLD, GEORGE
Address 1432 BROAD STREET
City-State-Zip: SELMA AL 36701

Title MGR
Name OXFORD BUSINESS INTERNATIONAL,LLC
Address 1451 WEST CYPRESS CREEK ROAD SUITE 300
City-State-Zip: FORT LAUDERDALE FL 33309

Title MGRM
Name GAMBLE, LENORA S
Address 6724 SW 28TH COURT
City-State-Zip: MIRAMAR FL 33023

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: NADINE PAUL

RA

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date