

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000062075

Entity Name: RIDE CARE MEDICAL SOLUTIONS LLC

Current Principal Place of Business:

822 SE 9TH STREET - STE. B
DEERFIELD BEACH, FL 33441

Current Mailing Address:

822 SE 9TH STREET - STE. B
DEERFIELD BEACH, FL 33441 US

FEI Number: 84-3350322

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VILLARROEL, CARLOS SR
822 SE 9TH STREET - STE. B
DEERFIELD BEACH, FL 33441 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 VILLARROEL, CARLOS SR
Address 6010 REESE RD BUILDING 5 APT 319
City-State-Zip: DAVIE FL 33314

Title MGR
Name SOMOZA, JEAN SR
Address 22215 BELLA LAGO DR APT 2119
City-State-Zip: BOCA RATON FL 33433

Title MGR
Name BOWMAN, RICHARD W JR
Address 866 KIPLING DRIVE
YORKTOWN HEIGHTS
City-State-Zip: NEW YORK NY 10598

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: RICHARD BOWMAN

CFO

06/09/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date