SIGNATURE: TORINA JONES	

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

DOCUMENT# L21000218585

Entity Name: CALL A RIDE SENIOR & DISABLE TRANSPORTATION LLC

Current Principal Place of Business:

4711 RUTHENIA ROAD TALLAHASSEE, FL 32305

Current Mailing Address:

4711 RUTHENIA ROAD TALLAHASSEE, FL 32305 US

FEI Number: NOT APPLICABLE

Name and Address of Current Registered Agent:

JONES, AARON A 4711 RUTHENIA ROAD TALLAHASSEE, FL 32305 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

Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	JONES, AARON A	Name	JONES, TORINA
Address	4711 RUTHENIA ROAD	Address	4711 RUTHENIA ROAD
City-State-Zip:	TALLAHASSEE FL 32305	City-State-Zip:	TALLAHASSEE FL 32305

Electronic Signature of Signing Authorized Person(s) Detail

that my name appears above, or on an attachment with all other like empowered.

FILED Apr 28, 2023 Secretary of State 5361699205CC

Certificate of Status Desired: No

Date

04/28/2023