

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000362148

**Entity Name:** RIDE HEALTH GROUP LLC

**Current Principal Place of Business:**

2230 MEARS PARKWAY  
MARGATE, FL 33063

**Current Mailing Address:**

8358 W. OAKLAND PARK  
UNIT 101  
SUNRISE, FL 33351 US

**FEI Number:** 87-2229687

**Certificate of Status Desired:** No

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

GRATIUM HOLDINGS LLC  
8358 W. OAKLAND PARK  
UNIT 101  
SUNRISE, FL 33351 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 MGRM  
Name JEAN, DIANA  
Address 203 NW 60TH AVE  
City-State-Zip: MARGATE FL 33063

*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:** DIANA JEAN \_\_\_\_\_

MEMBER

04/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date