

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000150002

**Entity Name:** RIDE GOOD TAXI LLC

**Current Principal Place of Business:**

1056 NEW ST E  
DELAND, FL 32724

**Current Mailing Address:**

1056 NEW ST E  
DELAND, FL 32724 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

DAVIS, STEVE  
1056 NEW ST E  
DELAND, FL 32724 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            AMBR  
Name            DAVIS, STEVE  
Address        1056 NEW ST E  
City-State-Zip: DELAND FL 32724

*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:** STEVE DAVIS

**OWNER**

**05/01/2023**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date