

# P21000031035

## STATEMENT OF FACT

10/2

This is to inform you I Ronald Platts has been a victim of Identity Theft. An unknown person or persons have created a Limited Liability Corp. in my name using my home address.

300 Ocean Forest Drive St. Augustine FL 32080

The name of the entity is HUCKLE SPINE AND INJURY INC. Document #P21000031035 effective date 3/29/2021.

This was made without my knowledge or consent. They have NO authority.

We have learned that the person or persons have tried to divert mail from our home address 300 Ocean Forest to

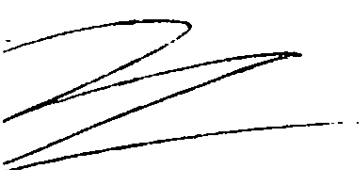
a forwarding address available from the USPS. The extent of the identity theft is still unknown

Reference #36250204 USPS Inspection service  
Service request 25617450 USPS

Stl Johns County Sheriffs office SJSO21WCR000243

000364693360

Ronald Platts  
300 Ocean Forest Dr  
St Augustine FL 32080

 Ronald Platts

W  
4/22/21



2 of 2

# Jurat Certificate

State of Florida

County of Orange

Sworn to (or affirmed) and subscribed before me this 22 day  
of April, 20 21, by means of ☒ physical presence or ☐ online notarization  
Ronald Platts (name of person making statement).

☐ Personally known to me \_\_\_\_\_

☒ Produced Identification

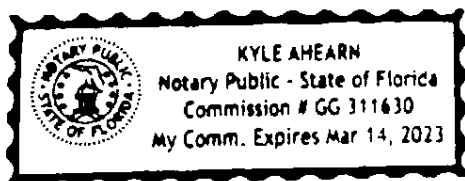
Type of Identification Produced FL DL

Notary Signature [Signature]

Title Notary Public

My appointment expires March 14, 2023

Place Seal Here



## Description of Attached document

Type or Title of Document

Statement of Fact

Document Date

4/22/2021

Number of Pages

1

Signer(s) Other Than Named Above