# 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.

OWNER

## SIGNATURE: VLADIMIR MOLOTIEVSKIY

Electronic Signature of Signing Authorized Person(s) Detail

# 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L12000106077

# Entity Name: FOUR WAYS MEDICAL TRANSPORTATION, LLC

### **Current Principal Place of Business:**

642 SIESTA KEY CIRCLE, APT. 2838 DEERFIELD BEACH, FL 33441

### **Current Mailing Address:**

642 SIESTA KEY CIRCLE, APT. 2838 DEERFIELD BEACH, FL 33441 US

### FEI Number: 46-0813246

### Name and Address of Current Registered Agent:

MOLOTIEVSKIY, VLADIMIR 642 SIESTA KEY CIR APT 2838 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	: MOLOTIEVSKIY VLADIMIR			03/27/2014
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	OWNER	Title	OWNER	
Name	MEDVID, VOLODYMYR	Name	MOLOTIEVSKIY, VLADIMIR	
Address	626 NW 13TH ST APT 35	Address	642 SIESTA KEY CIR APT 2838	3
City-State-Zip:	BOCA RATON FL 33486	City-State-Zip:	DEERFIELD BEACH FL 33441	

Certificate of Status Desired: No

Mar 27, 2014 Secretary of State CC6862312427

FILED

Date

03/27/2014