

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000113088

**Entity Name:** DOCTORBIRD TRANSPORTATION LLC

**Current Principal Place of Business:**

1543 KISH BLVD.  
TRINITY, FL 34655

**Current Mailing Address:**

7813 MITCHELL BLVD  
SUITE 106  
TRINITY, FL 34655 US

**FEI Number:** 82-2546962

**Certificate of Status Desired:** Yes

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

NELSON, GARY S  
1543 KISH BLVD.  
TRINITY, FL 34655 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	Title	AMBR
Name	NELSON, GARY S	Name	NELSON, JUDITH E
Address	1543 KISH BLVD	Address	1543 KISH BLVD.
City-State-Zip:	TRINITY FL 34655	City-State-Zip:	TRINITY FL 34655

*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:** GARY NELSON

AMBR - CEO

02/03/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date