

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000221893

Entity Name: LORENZO MEDICAL TRANSPORTATION LLC

Current Principal Place of Business:

6233 LAKEVILLE RD
ORLANDO, FL 32818

Current Mailing Address:

6233 LAKEVILLE RD
ORLANDO, FL 32818

FEI Number: 83-1992184

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LORENZO TEJEDA, MEIKEL L
6233 LAKEVILLE RD
ORLANDO, FL 32818 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 MGR
Name LORENZO TEJEDA, MEIKEL L
Address 6233 LAKEVILLE RD
City-State-Zip: ORLANDO FL 32818

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: LORENZO TEJEDA , MEIKEL L

MGR

04/09/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date