

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000221893

**Entity Name:** LORENZO MEDICAL TRANSPORTATION LLC

**Current Principal Place of Business:**

3823 215 TH ST SE  
BOTHHELL, WA 98021

**Current Mailing Address:**

3823 215 TH ST SE  
BOTHHELL, WA 98021 US

**FEI Number:** 83-1992184

**Certificate of Status Desired:** No

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

LORENZO TEJEDA, MEIKEL L  
3823 215TH ST SE  
BOTHHELL, FL 98021 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 3823 215 TH ST SE  
City-State-Zip: BOTHHELL WA 98021

*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:** MEIKEL LORENZO TEJEDA

02/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date