

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000262571

Entity Name: URIDE RIDE 2 HEALTH, LLC

Current Principal Place of Business:

2131 RIBBON FALLS PARKWAY
ORLANDO, FL 32824

Current Mailing Address:

2131 RIBBON FALLS PARKWAY
ORLANDO, FL 32824

FEI Number: 83-2464181

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, LAURA
2131 RIBBON FALLS PARKWAY
ORLANDO, FL 32824 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
Name MARTINEZ, LAURA
Address 2131 RIBBON FALLS PARKWAY
City-State-Zip: ORLANDO FL 32824

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: LAURA MARTINEZ

OWNER

04/08/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date