

Environmental Protection and Growth Management Department ENVIRONMENTAL AND CONSUMER PROTECTION

One North University Drive, Suite A203, Plantation, Florida 33324
954-519-1260 • Fax 954-765-4804



MEMORANDUM

DATE:

April 8, 2019

TO:

Broward County Board of County Commissioners

FROM:

Jeffery Halsey, Director

Environmental and Consumer Protection Division (ECPD)

Jeffery Halsey 2019.04.08

09:20:34 -04'00'

SUBJECT:

Recommendation for Denial of Class 5 - Nonemergency Medical

Transportation License (May 7, 2019 Meeting)

Consideration for issuing a Class 5 – Nonemergency Medical Transportation License to, among others, Executive Ride Transport, Inc., is currently scheduled for public hearing on May 7, 2019. The Emergency Medical Services Review Committee (EMS Review Committee) unanimously recommended denial of the license based on the noncompliance history of Executive Ride Transport, Inc., its Owner/General Manager, Wayne Rowe, and Allied Medical Transport, Inc., an entity formerly owned by Mr. Rowe (Attachment 1). The Environmental and Consumer Protection Division (ECPD) also recommended denial of the license for the same reasons.

Section 3 $\frac{1}{2}$ - 8 (d) - (g) of the County Code (Attachment 2) outlines factors to be considered by the County Administrator, the EMS Review Committee, and the Board when considering license applications. From this list of factors, the EMS Review Committee's and ECPD's recommendations for denial are based on past performance, service record, financial ability and financial responsibility concerns.

A summary of the concerns includes:

- a. Seven noncompliance notices, dated May 2015 through July 2016, to Allied Medical Transport, Inc. (Attachments 3 9);
- b. Four noncompliance notices, dated October 2018 through December 2018, to Executive Ride Transport, Inc. as a licensed entity¹ (Attachments 11 14);
- c. Two noncompliance notices, dated July 12, 2016 and February 27, 2019, to Executive Ride Transport, Inc. for operating as an unlicensed entity (Attachments 10 and 15);
- d. One Allied Medical Transport, Inc. open case in the U.S. District Court (Attachment 16);
- e. One Florida judgment lien against Allied Medical Transport (Attachment 17) and eight federal liens (Attachment 18) against Allied Medical Transport totaling \$761,228;
- f. One Florida judgment lien (Attachment 19) and one federal lien (Attachment 20) against Executive Ride Transport, Inc. totaling \$3,561.

¹ Executive Ride Transport, Inc. surrendered their license at the request of ECPD on December 19, 2018 due to ECPD's concerns about inaccurate information in the license application and a change in ownership.

Broward County Board of County Commissioners Recommendation for Denial April 8, 2019

My number is 954-818-7509 should any commissioner prefer a personal briefing on this item.

cc: Bertha Henry, County Administrator Monica Cepero, Deputy County Administrator Henry Sniezek, Director, EPGMD Lenny Vialpando, Deputy Director, EPGMD

Attachment 1



Broward County OFFICE OF MEDICAL EXAMINER AND TRAUMA SERVICES Trauma and EMS Section

CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY OR NONEMERGENCY MEDICAL TRANSPORTATION SERVICE LICENSE

Please type. Answer all questions that apply to the level of service to be provided. Attach additional sheets as needed.

STATEMENTS AND MATERIALS SUBMITTED WILL BE SUBJECT TO VERIFICATION

	CH	ECK TYPE OF	- APPLICATI	ON FUR	CLASSIFICATION	OF SERVIC	
		New		Z	Renewal		
		Class 1 - AL	S Rescue		Class 2 - ALS Tran	nsfer	
		Class 3 - BL	S Transport		Class 4 - ALS Air I	Rescue	
	Z	Class 5 - No	nemergency	Medical 7	Fransportation Servi	ce (NEMTS)	
1.	Allied Medic	al Transport, I		· · · · · · · · · · · · · · · · · · ·			
		4 12	Name of Ser	vice Gover	nmental Entity		
	2170 Blount	Road		Pomp	ano Beach	FL	33069
		iling Address		City		State	Zip Code
	954-681-437	73					
	Tel	ephone					
2.	Wayne Row	1 0			alliedmedicaltı	ransport@ya	hoo.com
۷.		ner's Name				Email Add	iress
	2170 Blount	Road		Pomp	oano Beach	FL	33069
	Ma	iling Address		City		State	Zip Code
		(Govern	mental Entity	attach na	ames of elected offic	cials)	
							arter@broward.org
3.	Diandre Her				954-681-43	 	
	Ge	neral Manager/Co	ontact Person		Telephone	Ema	ail Address
4.	Date incorpor	rated/formation	of business	associatio	on: <u>3/13/2006</u>	(Attach	ment # <u>1</u>)
(At	tach articles	of incorporat	ion; names	and add	ress of sharehold	ers along v	vith number of

Page 1 of 3

outstanding shares.)

Exhibit 3 Page 4 of 39

5.	Geographic area requesting to service (be specific):
	Broward County
6.	Attach FCC license/communications contract: (Attachment # 2)
7.	Address of present/proposed main station and any substations (attach list if more than three (3) substations):
	Main Station: 2170 Blount Road, Pompano Beach, FL 33069
	Substation:
	Substation:
	Substation:
8.	Financial Information: (Attachment # 3)
	Non-governmental - provide a financial statement as listed in Broward County Administrative Code Section 33.11.g.
	Governmental - copy of budget sheet.
9.	Insurance: (Attachment # 4)
	Provide copies of Certificates of Insurance - Non-governmental - Identified in Chapter 3½, Section 3½ - 17(a)(1), Broward County Code of Ordinances.
	Governmental - refer to section Chapter 3½ - 17(c), Broward County Code of Ordinances.
	NEW - must provide proof of ability to comply with Chapter 3½ - 17(a)(2), Broward County Code of Ordinances for service requested.
10.	Vehicle information: Complete and attach appropriate form.
11.	Personnel information: Complete and attach appropriate form.
	NEMTS PROVIDE copies of all required training information pursuant to Broward County Administrative Code Section 33.15.g, for each driver listed on form B-2.
12.	All COPCN applicants (if applicable):
	A. Attach contract with a medical director as provided by State Law, include copy of DEA license.
	B. Classes 1 and 4 - attach current medical treatment protocols.
	C. Class 2 and Class 3 - attach current interfacility transport protocols.
	D. Identify staffing patterns and operational hours for each state permitted vehicle in your fleet.
13.	Attach schedule of rates for services rendered (new or proposed).

Page 2 of 3

All statements on this application and attachments are true and correct.

D. Hernands	Ctene	eral Manager
Signature of Owner/Manager	Title	<i>J</i>
STATE OF FLORIDA COUNTY OF Brown of		
Sworn to (or affirmed) and subscribed before me to	his 27 day of OCIUS	\sim , 20 $\frac{14}{\cdot}$, by
Diandre & Hernande	? こ	(name-of-person making statement).
DIANA DELORENZO	(Signature	Notary Public - State of Florida)
Notary Public, State of Florida Commission# FF 139960 My comm. expires July 8, 2018	, ,,	ommissioned Name of Notary Public) OR Produced Identified:
		Produced: DC F2 · H 655 - 171-86 \$23-0

Additional requirements for New applicants:

Non-governmental and NEMTS:

- 1. Minimum of three (3) letters of reference **mailed/emailed** to the Trauma Management Agency (business or personal).
- 2. Completed local and state criminal background checks for each owner, manager, officer and/or director. (INTERNET BACKGROUND CHECKS ARE NOT ACCEPTABLE.)
- 3. Preceding five years business experience.

All applicants:

- 1. Return signed, notarized application along with an application fee of \$565.00 (\$574.00 as of October 1, 2014), made payable to the Broward County Board of County Commissioners.
- 2. Renewal applicants NOTE: COPCN/License and Vehicle permit fees will be processed separately (as of October 1, 2014 COPCN/License fees will be \$287.00 and Vehicle permit fees will be \$59.00).
- 3. Non-governmental and NEMTS: provide a copy of County and Municipal Business Tax Receipts or **NEW** applicant provide a letter of identifying proposed business office location in Broward County.

Page reserved for Administrative Use only.

Recommendation of the Broward Regional EMS Council, EMS Review Committee (if required):

Per BCC Chapter 3½, Section 3½-15(b), no complaints were	e filed for this agency, therefore no action is needed by			
the EMS Review Committee.				
N/A Date	Chair, EMS/Review Committee			
Recommendation/comments of County Admini				
Staff recommends issuance of said license to Allied Medica	l Transport, Inc.			
December 18, 2014 Date	County Administrator or Designee			
This application for a Nonemergency Medical Transport by Allied Medical Transport, Inc. Approved as Submitted:				
CREATED Denied:	Mayor, Broward County Board of County Commissioners Mayor, Broward County Board of County Commissioner			

Attachment 2

Chapter 3½-8(d) – (g) Broward County Code of Ordinances

- (d) Subsequent to receiving the application and the processing fee, the administrator shall cause an investigation to be made of the applicant. The investigation shall include but not be limited to the following:
 - (1) The type and condition of the applicant's dispatching and communications equipment and system;
 - (2) The type and condition of the equipment utilized by the applicant;
 - (3) The type and condition of the applicant's vehicles;
 - (4) The telephone communications system and equipment used in handling trip requests, cancellations and the like;
 - (5) The financial ability of the applicant to render safe, comfortable services and to maintain or replace equipment required by the state, county or municipalities;
 - (6) The financial responsibility of the applicant to maintain insurance for the payment of personal injury, death and property damage claims;
 - (7) The past performance and service record, if any, of the applicant;
 - (8) Such other information as the administrator or designee may deem necessary.
- (e) The EMS Review Committee shall review all new applications for licenses, and renewal applications for licenses as provided for in Section 3½-15, and shall make recommendations for approval or denial to the board through the administrator. Based upon the information received in the applications and after completion of the investigation, the administrator shall recommend to the board the granting or denial of licenses reviewed by the EMS Review Committee.
- (f) Subsequent to receiving the recommendation of the administrator, the board shall hold a public hearing to consider all new applications for licenses, and those renewal applications for licenses that are reviewable by the EMS Review Committee. The administrator shall, within a reasonable time period, provide written notice by U.S. mail, or email, or facsimile when authorized, to all applicants and all current nonemergency licensees of the date, time, and place of the public hearing.
- (g) At such hearing, the board shall make its findings as to each applicant and shall determine whether the applicant meets the requirements set forth herein. In making its findings and determinations, the board shall consider those specifications established by its adopted rules and regulations and shall consider, in addition to those items set out in Section 3½-8(d), the following:
 - (1) The recommendations of the administrator;
 - (2) The benefits that will accrue to the public interest from the proposed service.
 - (3) Any recommendations received from the municipalities within Broward County;
 - (4) All relevant matters presented at the public hearing; and
 - (5) Such other matters deemed to be in the best interests of the public health, safety, and welfare of the residents of Broward County.



5301 S.W. 31st Avenue • Fort Lauderdale, Florida 33312- 6619 • 954-357-5200 • FAX 954-327-6580

May 14, 2015

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

Allied Medical Transport, Inc. does not comply with the following:

Broward County Code of Ordinances Chapter 3½, Sec. 3½-17(b) – Insurance;

This letter shall serve as notice to Allied Medical Transport, Inc., to bring your agency into compliance, by providing the appropriate Certificate of Insurance, within ten (10) days of receipt of this letter.

Failure to do so will cause this office to precede with revocation of your license, pursuant to Broward County Code of Ordinance, Chapter 3½, Sec. 3½-11 by scheduling a hearing of the EMS Review Committee prior to submission to the Board of County Commissioners.

If you have any questions concerning this letter, contact this office to discuss the matter further.

Cordially,

Cheryl Rashkin, Manager Trauma and EMS Section

c: Rick Sluman, Medical Transportation Inspector, Trauma and EMS Section

Attachment 4



Office of Medical Examiner and Trauma Services

5301 S.W. 31st Avenue • Fort Lauderdale, Florida 33312- 6619 • 954-357-5200 • FAX 954-327-6580

May 15, 2015

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

Allied Medical Transport, Inc. does not comply with the following standards for nonemergency medical transportation services:

- 1. Broward County Administrative Code 33.15(g)(1)(e),(g), and (h);
- 2. Broward County Administrative Code 33.15(h)(1)(a).

This letter shall serve as notice to Allied Medical Transport, Inc., to bring your agency into compliance, by providing the appropriate records and maintaining them in accordance with the above rules, within thirty (30) days of receipt of this letter.

Failure to do so will cause this office to precede pursuant to Broward County Code of Ordinance, Chapter 3½, Sec. 3½-11 by scheduling a hearing of the EMS Review Committee.

If you have any questions concerning this letter, contact this office to discuss the matter further.

Cordially,

Rick Sluman, Medical Transportation Inspector Trauma and EMS Section

c: Cheryl Rashkin, Manager, Trauma and EMS Section



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May 27, 2015

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

In follow-up to Allied Medical Transport, Inc.'s recent email from Ms. Hernandez stating that Allied Medical Transport, Inc. is on a moth-to-month basis with its insurance carrier, this office will require immediate notification in any change in your Business Automobile Liability coverage. Additionally, a renewal Certificate of Insurance will be due no later than close of business the day prior to the effective policy's expiration.

This is due to the fact that Allied Medical Transport, Inc. cannot comply with the 30 day cancelation notice required by Broward County Code of Ordinances, Chapter 3½-17, nor can it provide a renewal certificate 30 days prior to the policy's expiration.

If you have any questions concerning this letter, contact this office to discuss the matter further.

Cordially,

Cheryl Rashkin, Manager Trauma and EMS Section

c: Rick Sluman, Medical Transportation Inspector, Trauma and EMS Section



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June 4, 2015

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

In follow-up to our e-mail discussions on June 3, 2015, Broward County Code of Ordinances, Chapter 3½-17 – Insurance, requires that every nonemergency medical transportation service provider's insurance policy provide a thirty (30) day notice of cancellation. Further, thirty (30) days prior to the policy's expiration date, the license holder shall provide the county with a renewal insurance certificate.

Allied Medical Transport's current insurance coverage (30 day extensions) does not meet these requirements, and therefore Allied Medical Transportation must provide insurance coverage for no less than 60 days at a time.

For further assistance or questions, please contact this office for assistance.

Cordially,

Rick Sluman, Medical Transportation Inspector Trauma and EMS Section

Attachment – Broward County Code of Ordinances, Chapter 3½-17 c: Cheryl Rashkin, Manager, Trauma and EMS Section



5301 S.W. 31st Avenue • Fort Lauderdale, Florida 33312- 6619 • 954-357-5200 • FAX 954-327-6580

July 7, 2015

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

Allied Medical Transport, Inc. does not comply with the following:

Broward County Code of Ordinances Chapter 3½, Sec. 3½-17(b) - Insurance;

This letter shall serve as notice to Allied Medical Transport, Inc., to bring your agency into compliance, by providing the appropriate Certificate of Insurance, within ten (10) days of receipt of this letter.

Failure to do so will cause this office to precede with revocation of your license, pursuant to Broward County Code of Ordinance, Chapter 3½, Sec. 3½-11 by scheduling a hearing of the EMS Review Committee prior to submission to the Board of County Commissioners.

If you have any questions concerning this letter, contact this office to discuss the matter further.

Cordially,

Rick Sluman, Medical Transportation Inspector Trauma and EMS Section

c: Cheryl Rashkin, Manager, Trauma and EMS Section

c: Cheryl Rashkin, Manager, Trauma and EMS Section



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September 1, 2015

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

Allied Medical Transport, Inc. does not comply with the following:

- 1. Broward County Code of Ordinances Chapter 3½, Sec. 3½-17(b) Insurance;
- 2. Broward County Administrative Code Chapter 33, Sec. 33.15(g)(e) Standards for Nonemergency Medical Transportation Services, Drivers and Staffing;
- 3. Broward County Administrative Code Chapter 33, Sec. 33.09(b)(1)(g) and (h) Applications for Certificates of Public Convenience and Necessity and Nonemergency Medical Transportation Service License, Vehicle and Driver Rosters.

This letter shall serve as notice to Allied Medical Transport, Inc., to bring your agency into compliance, by providing the appropriate Certificate of Insurance and other documents, immediately upon receipt of this letter.

Failure to do so will cause this office to precede with revocation of your license, pursuant to Broward County Code of Ordinance, Chapter 3½, Sec. 3½-11 by scheduling a hearing of the EMS Review Committee prior to submission to the Board of County Commissioners.

If you have any questions concerning this letter, contact this office to discuss the matter further.

Cordially,

Rick Sluman, Medical Transportation Inspector Trauma and EMS Section



Office of Medical Examiner and Trauma Services 5301 S.W. 31st Avenue • Fort Lauderdale, Florida 33312-6619 • 954-357-5200 • FAX 954-327-6580

July 12, 2016

Mr. Wayne Rowe Allied Medical Transport, Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe:

Allied Medical Transport, Inc. does not comply with the following:

Broward County Code of Ordinances Chapter 3½, Sec. 3½-17(b) – Insurance;

This letter shall serve as notice to Allied Medical Transport, Inc., to bring your agency into compliance, by providing the appropriate Certificate of Insurance, immediately upon receipt of this letter.

Failure to do so will cause this office to precede with revocation of your license, pursuant to Broward County Code of Ordinance, Chapter 3½, Sec. 3½-11 by scheduling a hearing of the EMS Review Committee prior to submission to the Board of County Commissioners.

If you have any questions concerning this letter, contact this office to discuss the matter further.

Respectfully,

Rick Sluman, Medical Transportation Inspector Trauma and EMS Section

c: Cheryl Rashkin, Manager, Trauma and EMS Section



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July 12, 2016

Ms. Christina Edwards
Executive Ride Transport, Inc.
12345 Crooked Creek Lane
Fort Myers, FL 33913

Dear Ms. Edwards:

On July 12, 2016, I was notified that your were providing services for PPEC Center in Broward, under a contract with Logisticare.

At present, Executive Ride Transport, Inc. does not hold a license in Broward County to provide Nonemergency Medical Transportation Services. Broward County Code of Ordinances, Chapter 3½, Sec. 3½-2 — "Certificates or licenses required," and Chapter 33.15 — "Standards for Nonemergency Medical Transportation Services," Broward County Administrative Code requires you to obtain a license prior to providing these services in Broward County. Attached is a copy of such for your reference.

This letter will be the only written notice to Executive Ride Transport, Inc. to immediately <u>CEASE</u> and <u>DESIST this level of transportation within Broward County</u>. Failure to cease and desist will subject you to legal action, including injunctive relief, in accordance with Broward County Code of Ordinance, Chapter 3½-22. Please govern yourself accordingly.

Contact this office to discuss the matter further and afford appropriate resolution to this issue.

Respectfully,

Cheryl Rashkin, Manager, Trauma and EMS Section

c: Adam Katzman, Assistant County Attorney, Broward County
Dr. Craig T. Mallak, MD, JD, Director, Office of Medical Examiner and Trauma Services
Rick Sluman, Medical Transportation Inspector, Trauma and EMS Section



Environmental Protection and Growth Management Department ENVIRONMENTAL AND CONSUMER PROTECTION DIVISION One North University Drive, Box 302, Plantation, Florida 33324 954-764-4400 • Fax 954-765-5309

October 30, 2018

Penelope Pinheiro, President Executive Ride Transport Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Ms. Pinheiro,

On October 29, 2018 I observed Executive Ride Transport Inc. vehicle 928 at West Broward Rehabilitation, 7751 W. Broward Blvd., Plantation, FL 33324. Vehicle 928 most recently failed inspection on October 22, 2018 as it had a deficiency notice from Miami-Dade affixed to the vehicle.

The vehicle also failed inspection on 09/11/18, 5/18/18, 4/12/18, and 7/28/17. During the 5/18/18 inspection it was noted to have a Stryker stretcher inside the vehicle. The stretcher had a torn mattress, improper passenger restraints, and was missing the floor hook to prevent the stretcher for unintentionally coming completely out of the vehicle. There was also a lack of clean linens for the stretcher. In a 5/18/2018 email to Mr. Rowe, Executive Ride was reminded/warned that the company is not permitted to provide this level of service. Vehicle 928 is not permitted for use in Broward County.

Upon watching the vehicle further, I saw two individuals bring a Stryker stretcher to the vehicle, with a passenger on it, and load the passenger into the vehicle. Again, Executive Ride Transport Inc. is not permitted to provide this level of service.

I spoke with Mr. Rowe who advised this vehicle was permitted in Miami-Dade as a stretcher vehicle and said the passenger maybe going to Miami-Dade. I advised Mr. Rowe that Broward County requires a license and proper vehicle permits, regardless of destination, where the trip originates in Broward County. On 10/30/2018 I received an email from him stating the trip was an "error." This was after requesting documents for the trip, which were never provided. Executive Ride Transport Inc. violated Broward County's Code of Ordinance, Chapter 3½ and its corresponding Administrative Code.

Per Broward County Administrative Code - 33.15. - Standards for Nonemergency Medical Transportation Services.

b. Prior to issuing a license or a renewal license for the provision of Nonemergency Medical Transportation Services, the County shall inspect each vehicle a minimum of one (1) time a year, to determine whether it meets all requirements of vehicle design, construction, communications, equipment and supplies, and sanitation prescribed in these rules for such vehicles. The Trauma Management Agency shall perform said inspections. A unit will be removed from service if it is found to be in an unsafe condition. If any unit is taken out of service for a safety or equipment violation, it shall not be placed back into service until

Penelope Pinheiro, President Executive Ride Transport Inc. October 30, 2018

approval is granted by the Trauma Management Agency. Vehicle permits shall be issued by the Trauma Management Agency for those vehicles successfully passing such inspections.

This letter shall serve as final notice to Executive Ride Transport Inc. to immediately:

CEASE and DESIST utilizing unpermitted vehicles within Broward County. Failure to cease and desist will subject you to legal action, including potential injunctive relief, in accordance with Broward County Code of Ordinance, Chapter 3½-22 and Chapter 33.18, Broward County Administrative Code. Please govern yourself accordingly.

If you wish to apply for a permit for these types of vehicles, submit the appropriate Nonemergency Medical Transportation Vehicle Permit Application (Form C,) Nonemergency Medical Transportation Vehicles (Form A-3,) and NEMTS Transportation Personnel (Form B-2.) Additionally, you will need to supply documentation that the stretcher vehicle driver and attendant have been trained in the use of the special equipment required for this level of transportation.

If you have any questions regarding the above, please feel free to contact me.

Cordially,

Richard Sluman, Medical Transport Inspector

Richard A Sluman, Jr.

Environmental and Consumer Protection Division

c: Robert Apicella, Regulated Business Supervisor, Environmental and Consumer Protection Division



Environmental Protection and Growth Management Department ENVIRONMENTAL AND CONSUMER PROTECTION DIVISION One North University Drive, Box 302, Plantation, Florida 33324 954-764-4400 • Fax 954-765-5309

November 9, 2018

Penelope Pinheiro, President Executive Ride Transport Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Ms. Pinheiro,

On November 9, 2018 I observed Executive Ride Transport Inc. vehicle 926 at DaVita Dialysis, 600 SW 3rd Street, Pompano Beach, FL 33060. Vehicle 926 most recently failed inspection on October 22, 2018 as there was damage to the doors, which failed to close safely, and an incomplete set of wheelchair passenger restraints. In fact, one (1) seatbelt was held together with a bent paperclip, and the others were just piled on the floor next to the wheelchair lift's pump (photos on file.) Vehicle 926 is not permitted for use in Broward County. Executive Ride Transport Inc. has been warned numerous times prior about using unpermitted vehicles.

Upon watching the vehicle further, I saw the driver Jean Philemon dropping off a wheelchair passenger. I spoke with Mr. Philemon who said he picked the passenger up in Hallandale Beach, 30 minutes prior but could give no further information.

I went inside the dialysis center and spoke with the passenger who was from a skilled nursing facility in Wilton Manors. He advised he was picked up there and brought to dialysis. I spoke with the nursing facility who advised he was insured by Magellan Healthcare and Veyo LLC was responsible for his transportation arrangements.

I sent Mr. Rowe, an email advising the issue and to stop using this vehicle in Broward County. Executive Ride Transport Inc. violated Broward County's Code of Ordinance, Chapter 3½ and its corresponding Administrative Code.

Per Broward County Administrative Code - 33.15. - Standards for Nonemergency Medical Transportation Services.

b. Prior to issuing a license or a renewal license for the provision of Nonemergency Medical Transportation Services, the County shall inspect each vehicle a minimum of one (1) time a year, to determine whether it meets all requirements of vehicle design, construction, communications, equipment and supplies, and sanitation prescribed in these rules for such vehicles. The Trauma Management Agency shall perform said inspections. A unit will be removed from service if it is found to be in an unsafe condition. If any unit is taken out of service for a safety or equipment violation, it shall not be placed back into service until approval is granted by the Trauma Management Agency. Vehicle permits shall be issued by the Trauma Management Agency for those vehicles successfully passing such inspections.

Penelope Pinheiro, President Executive Ride Transport Inc. November 9, 2018

- c. Sanitation and Maintenance. All Nonemergency Medical Transportation Service vehicles shall:
- 7. Assure that all doors, latches, and handles are in proper working order;
- d. Vehicle Design. Nonemergency Medical Transportation Service vehicles shall be required to adhere to vehicle design criteria as required by Federal ADA guidelines and any other criteria established by Broward County pursuant to ordinance or resolution.
- (c) Each vehicle shall have, for each passenger transported, restraining belts or straps designed to securely confine passengers to the wheelchairs in which they are transported;

This letter shall serve as final notice to Executive Ride Transport Inc. to immediately:

CEASE and DESIST utilizing unpermitted vehicles within Broward County. Failure to cease and desist will subject you to legal action, including potential injunctive relief, in accordance with Broward County Code of Ordinance, Chapter 3½-22 and Chapter 33.18, Broward County Administrative Code. Please govern yourself accordingly.

If you have any questions regarding the above, please feel free to contact me.

Cordially,

Richard Sluman, Medical Transport Inspector Environmental and Consumer Protection Division

Richard A Sluman, Jr.

c: Robert Apicella, Regulated Business Supervisor, Environmental and Consumer Protection Division



Environmental Protection and Growth Management Department ENVIRONMENTAL AND CONSUMER PROTECTION DIVISION One North University Drive, Box 302, Plantation, Florida 33324 954-764-4400 • Fax 954-765-5309

November 21, 2018

Wanye Rowe, President Executive Ride Transport Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe,

On November 16, 2018 you notified Broward County that Ms. Penelope Pinheiro is no longer the president of Executive Ride Transport Inc. Further, on November 19, 2018 you advised you were the sole owner and president of the company going forward. Ms. Penelope Pinheiro was listed as the owner and president on the application for a Nonemergency Medical Transportation Services license dated December 22, 2016. She was also listed as the 8/9/2016, 1/25/2017, 3/23/2017 reports filed with the Florida Department of State. In a 10/31/2018 "Florida For Profit Corporation Reinstatement" you (Wayne Rowe) are listed as president of the company.

Additionally, on November 20, 2018 I spoke with Ms. Pinheiro who advised she was never the president, nor owner of the company. She was not affiliated with the company and was only on the paperwork for the purposes of the company obtaining a loan.

As such, and at the least, there has been a change in officers or ownership which is not allowed by Broward County's Ordinance. Further, the original application contains false representations and/or omitted material facts upon which the license was secured.

Executive Ride Transport Inc. has violated Broward County's Code of Ordinance, Chapter 3½ and its corresponding Administrative Code.

Per Broward County Ordinance Chapter – 3½-16. - Transfer or assignment of certificates or licenses.

- (a) No license or certificate issued pursuant to this chapter is assignable or transferable except upon written approval by the board in the same manner and subject to the same application, investigation, fees, and public hearing as original applications for licenses or certificates.
- (b) Any majority transfer of shares of stock or interest of any person or operator so as to cause a change in the officers or stockholders of more than twenty (20) percent of the shares of such service shall be deemed a transfer or assignment.

This letter shall serve as final notice to Executive Ride Transport Inc. to immediately:

Wayne Rowe, President Executive Ride Transport Inc. November 21, 2018

CEASE and DESIST providing nonemergency medical transportation services until Executive Ride Transport Inc. receives written approval from the Broward County Board of County Commissioners to provide this level of service. Failure to cease and desist will subject you to legal action, including potential injunctive relief, in accordance with Broward County Code of Ordinance, Chapter 3½-22 and Chapter 33.18, Broward County Administrative Code. Please govern yourself accordingly.

Executive Ride Transport Inc. must surrender the license issued on March 28, 2017 and vehicle permit #1383 issued to vehicle 965. Executive Ride Transport Inc. may apply for a new license under the new ownerships and corporate officers.

If you have any questions regarding the above, please feel free to contact me.

Cordially,

Richard Sluman, Medical Transport Inspector Environmental and Consumer Protection Division

Richard A Sluman, Jr.

c: Robert Apicella, Regulated Business Supervisor, Environmental and Consumer Protection Division



Environmental Protection and Growth Management Department ENVIRONMENTAL AND CONSUMER PROTECTION DIVISION One North University Drive, Box 302, Plantation, Florida 33324 954-764-4400 • Fax 954-765-5309

December 10, 2018

Wanye Rowe, President Executive Ride Transport Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe,

On November 21, 2018 Broward County notified Executive Ride Transport Inc. that it was to surrender the license issued by the Broward County Board of County Commissioners on March 28, 2017. Further, to cease providing Nonemergency Medical Transportation Services in Broward County, until Executive Ride Transport Inc. is awarded a new license.

On November 29, 2018 Executive Ride Transport Inc. acknowledged receiving the letter in an email to Jennifer Kinberger, Compliance Manager at Veyo.

On December 10, 2018 at approximately 1:46 PM, Executive Ride Transport Inc.'s vehicle 965 was observed picking-up a wheelchair passenger at 2675 N. Andrews Avenue, Fort Lauderdale, FL 33311. The driver loaded the passenger via the wheelchair lift and secured the wheelchair. The driver incorrectly secured the passenger with the wheelchair passenger restraints. The driver routed the lap belt of the wheelchair passenger restraints over top of the wheelchair handles, which created a dangerous situation whereby the restraint passed over the passenger's abdomen and lower chest. The seat belt did not contact the passenger's hip and go below the abdomen as it is supposed to. Further, the shoulder belt was used, and due to the improper placement of the lap belt passed dangerously close to the passenger's neck.

I spoke with the driver, Jean Philmon, who showed me the trip information where he was dispatched to pick up the passenger at 1:15 PM and bring her to Broward Health Medical Center at 1600 South Andrews Avenue, Fort Lauderdale, FL 33301. The trip was already 30 minutes late. I informed Mr. Philmon of Broward County's letter to Executive Ride Transport Inc. and he said he would let "Wayne" know of our interaction.

The permit issued to vehicle 965 was removed due to the unsafe application of the wheelchair passenger restraints.

Executive Ride Transport Inc. has violated (and continues to violate) Broward County's Code of Ordinance, Chapter 3½ and its corresponding Administrative Code.

Per Broward County Ordinance Chapter $-3\frac{1}{2}$ -16. - Transfer or assignment of certificates or licenses.

(a) No license or certificate issued pursuant to this chapter is assignable or transferable except upon written approval by the board in the same manner

Wayne Rowe, President Executive Ride Transport Inc. December 10, 2018

and subject to the same application, investigation, fees, and public hearing as original applications for licenses or certificates.

(b) Any majority transfer of shares of stock or interest of any person or operator so as to cause a change in the officers or stockholders of more than twenty (20) percent of the shares of such service shall be deemed a transfer or assignment.

This letter shall serve as final notice to Executive Ride Transport Inc. to immediately:

CEASE and DESIST providing nonemergency medical transportation services until Executive Ride Transport Inc. receives written approval from the Broward County Board of County Commissioners to provide this level of service. Failure to cease and desist will subject you to legal action, including potential injunctive relief, in accordance with Broward County Code of Ordinance, Chapter 3½-22 and Chapter 33.18, Broward County Administrative Code. Please govern yourself accordingly.

Executive Ride Transport Inc. must surrender the license issued on March 28, 2017 and cease providing wheelchair transportation in Broward County. Executive Ride Transport Inc. may apply for a new license under the new ownerships and corporate officers.

If you have any questions regarding the above, please feel free to contact me.

Cordially,

Richard Sluman, Medical Transport Inspector

Richard A Sluman, Jr.

Environmental and Consumer Protection Division

c: Robert Apicella, Regulated Business Supervisor, Environmental and Consumer Protection Division



Environmental Protection and Growth Management Department ENVIRONMENTAL AND CONSUMER PROTECTION
One North University Drive, Mailbox 302, Plantation, Florida 33324
954-765-440 • Fax 954-765-5309



February 27, 2019

Wayne Rowe, President Executive Ride Transport Inc. 2170 Blount Road Pompano Beach, FL 33069

Dear Mr. Rowe,

On December 19, 2018 Executive Ride Transport Inc. surrendered the license issued by Broward County to provide Nonemergency Medical Transportation Services after it was requested to do so as that license was based upon omitted material information and false statements in the original application. Further at the time of the letter Executive Ride Transport Inc. was in violation of Broward County Code of Ordinance Chapter 3½-16. – Transfer or assignment of certificates or licenses.

On February 27, 2019 I observed Executive Ride Transport Inc. vehicle 939 at LabCorp, 7061 Cypress Road, Plantation, FL 33317. The driver picked-up and loaded a wheelchair passenger at 7:28 AM in front of the building. The passenger was unsafely and improperly secured in the vehicle (no shoulder belt used to secure wheelchair passenger.) The vehicle is not permitted to provide this level of transportation in Broward County.

Executive Ride Transport Inc. has violated Broward County's Code of Ordinance, Chapter 3½ and its corresponding Administrative Code.

1. Chapter 3½-2. — Certificates or licenses required - (b) Every person, firm, corporation or association that provides nonemergency medical transportation services within Broward County, Florida, shall obtain a license from the Board of County Commissioners of Broward County, Florida.

This letter shall serve as final notice to Executive Ride Transport Inc. to immediately:

CEASE and DESIST utilizing unpermitted vehicles within Broward County. Failure to cease and desist will subject you to legal action, including potential injunctive relief, in accordance with Broward County Code of Ordinance, Chapter 3½-22 and Chapter 33.18, Broward County Administrative Code. Please govern yourself accordingly.

If you have any questions regarding the above, please feel free to contact me.

Cordially,

Richard Sluman, Medical Transport Inspector Environmental and Consumer Protection Division

Richard A Sluman, Jr.

c: Robert Apicella, Regulated Business Supervisor, Environmental and Consumer Protection Division

Exhibit 3

Find Your Regional Office

Directory

1-844-762-NLRB

Espa Page 26 of 39

Attachment 16

Search

search Tools

Home » Cases & Decisions » Cases » Case Search

Allied Medical Transport, Inc.

Case Number: 12-CA-072141

Date Filed: 01/10/2012

Status: Open

Location: Hollywood, FL

Region Assigned: Region 12, Tampa, Florida

Docket Activity

<u>Date</u> <u>Document</u>								<u>I</u>	Issued/Filed By			
07/11/2018	US Distri	ct Cour	t Order	(Court							
07/03/2018	US Distri	ct Cour	t - Exhi	bits*					(Charged Part	y / Respondent	
07/03/2018	US Distri	US District Court - Exhibits*									y / Respondent	
07/03/2018	US Distr	ct Cou	rt - Exhi	bits*					(Charged Party / Respondent		
07/03/2018	US Distr	ct Cou	rt - Exhi	bits*					(Charged Party / Respondent		
07/03/2018	US Distr	ict Cou	rt - Exhi	bits*					(Charged Party / Respondent		
07/03/2018	US Distr	ict Cou	rt - Exhi	bits*					(Charged Party / Respondent		
07/03/2018	US Distr	ict Cou	rt - Exhi	bits*					(Charged Party / Respondent		
07/03/2018	US Distr	US District Court - Exhibits*								Charged Party / Respondent		
07/03/2018	US District Court - Memo in Support of Petition*							(Charged Part	y / Respondent		
	1	2	3	4	5	6	7	8	9	next >	last »	

The Docket Activity list does not reflect all actions in this case.

Related Documents

Brief

Allegations

- 8(a)(3) Discharge (Including Layoff and Refusal to Hire (not salting))
- 8(a)(5) Repudiation/Modification of Contract [Sec 8(d)/Unilateral Changes]

^{*} This document may require redactions before it can be viewed. To obtain a copy, please file a request through our FOIA Branch.

8(a)(5) Refusal to Bargain/Bad Faith Bargaining (incl'g surface bargaining/direct dealing)

• 8(a)(3) Discipline

Participants

<u>Participant</u>	<u>Address</u>	<u>Phone</u>		
Charged Party / Respondent Employer ALLIED MEDICAL TRANSPORT, INC.	2170 Blount Rd Pompano Beach, FL 33069-5111	(954)681-4373		
Charging Party Additional Service TRANSPORT WORKERS UNION, AFL-CIO	6335 NW 36 St (817)682-3327 Ste 301 Virginia Gardens, FL 33166-			
Charging Party Union TRANSPORT WORKERS UNION OF AMERICA	501 3rd St NW, 9th Floor Washington, DC 20001-2790			

Related Cases

Case Number	Case Name	<u>Status</u>
12-CA-072148	Allied Medical Transport	Open
12-CA-074078	Allied Medical Transport (AMT)	Open

Sign up for NLRB Updates

News

Board Grants Review and Invites Briefs Regarding Jurisdiction Over Charter Schools February 4, 2019

NLRB Returns to Long-Standing Independent-Contractor Standard January 25, 2019

NLRB Chairman Provides Response to Members of Congress Regarding Joint-Employer Rulemaking January 17, 2019

NLRB Further Extends Time for Submitting Comments on Proposed Joint-Employer Rulemaking in Light of DC Circuit's Recent Browning-Ferris Decision January 11, 2019

Exhibit 3

NLRB Pager 28 Jol 39 Issues

Updated Bench Book
January 9, 2019

1 of 132 »

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Exhibit Se 1 of 1 Page 29 of 39

Florida Department of State

DIVISION OF CORPORATIONS



Previous on List

Next on List

Return to List

Debtor Name Search

Submit

Judgment Lien Detail

Processed Thru 02/20/2019

To determine if a writ of execution on a final judgment was docketed with a sheriff prior to October 1, 2001, view the filing image.

Filing Information

Document Number J17000370512 View

J17000370512 View image in PDF format

Status ACTIVE

 Case Number
 1000000746422

 Name of Court
 BROWARD

 File Date
 06/28/2017

 Date of Entry
 06/22/2017

 Expiration Date
 06/28/2027

 Amount Due
 \$ 11,139.28

Interest Rate For interest rate info, call (850) 488-6800

Name And Address of Judgment Creditor (Plaintiff)

STATE OF FLORIDA, DEPARTMENT OF REVENUE CORAL SPRINGS SERVICE CENTER 3301 N UNIVERSITY DR STE 200 CORAL SPRINGS FL330654149

Name And Address of Judgment Debtor(s) (Defendant(s))

ALLIED MEDICAL TRANSPORT INC 2170 BLOUNT RD POMPANO BEACH, FL 330695111 US Document Number: P06000036416

FEI/EIN Number: 204482434

Events

There are no events for this filing.

Previous on List Next on List Return to List

Debtor Name Search

Submit

Florida Department of State, Division of Corporations

Form 668 (Y)(c)

Signature /

for G. SHNEIDER

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

(Rev. February 2004)	n		
Area: SMALL BUSINES Lien Unit Phone:	S/SELF EMPLOYED AREA #3 (800) 913-6050	Serial Number	For Optional Use by Recording Office
Code, we are a have been asse a demand for p there is a lien i property belon	r section 6321, 6322, and 62 iving a notice that taxes (inclused against the following-name ayment of this liability, but it in favor of the United States of ging to this taxpayer for the alties, interest, and costs that	uding interest and penalties) ned taxpayer. We have made t remains unpaid. Therefore, on all property and rights to amount of these taxes, and	FILED 2013 APR 18 AH 1 SECRETARY OF STALLAHASSEE, FI
Name of Taxpaye	er ALLIED MEDICAL TRAN a Corporation	NSPORT INC	LEI 18 AM ARY OF SSEE, F
Residence	2170 BLOUNT RD POMPANO BEACH, FL	33069-5111	D 111:01 STATE FLORID

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax(a)	Tax Period Ending (b)	Identifying Number	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)					
1120	12/31/2010		11/19/2012		4093.00					
	·			13FLR	000451.3-7					
Place of Filing		שתעתה מת אמע								
	SECRETARY OF STATE Total \$ 4093.00									
TALLAHASSEE, FL 32314										
This notice was prepared and signed at, on this,										
theO5th day of _April										

(NOTE: Certificate of officer authorized by lew to take acknowledgment is not essential to the validity of Notice of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.8. 409)

Title REVENUE OFFICER

(954) 423-7779

23-02-1950

Form 668 (Y)(c)

Department of the Treasury - Internal Revenue Service

Rev. February 2004)	Motice	e or re	egerai (ax Lie	n	
Area: SMALL BUSIN Lien Unit Phon	For Optiona	Use by Recording Office					
Code, we are have been as a demand fo there is a fie property befadditional pe	e giving a notice seessed against the r payment of the n in favor of the onging to this ta enalties, interest,	that taxes (including following-named is liability, but it reduced the United States on axpayer for the among and costs that me	ing interest taxpayes the mains usuall propertions of accuracy acc	est and pen ir. We have npaid. The erty and rig these taxe e.	alties) made refore, thts to		13 OFC 17 PH 1:30
Name of Taxp	ayer ALLIED M a Corpor	EDICAL TRANS	PORT I	NC			
Residence	2170 BLO POMPANO	OUNT RD BEACH, FL 330	069-51	11			PH 1:30
unless notice	of the lien is refile following such dat	ORMATION: For ed by the date given in e, operate as a certing	column (e), this notic	e shall,		
Kind of Tax (a)	Ending Identifying Number Assessment Ref				Day for filing (e)	Unpaid Balance of Assessment (f)	
941	06/30/2012	20-4482434	01/1	14/2013	02/1	3/2023 1:3FLR	274863.36
Place of Filing	•	ARY OF STATE					
	TALLAH	IASSEE, FL 32	314			Total	\$ 274863.36
	as prepared and s	signed at	······	MORE, MI)		, on this
Signature /	1 100	۲.		Title REVENUE			23-02-392

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lian Rev. Rul. 71-466, 1971 - 2 C.B. 409)

Form 668(Y)(c) (Rev. 2.20)

Form 668 (Y)(c) (Rev. February 2004)

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

Area: SMALL BUSIN Lien Unit Phon	ESS/SELF EMPLO	Serial Nu		07714	For Optional Use by Recording Office				
As provided Code, we are have been as a demand for there is a lie property bell additional personnel.	by section 6321 to giving a notice assessed against the payment of this in in favor of the longing to this tanalties, interest,	that taxes (include following-name is liability, but it in United States of axpayer for the axpayer for that it is included in the included in	ding Inte	e Internal Rarest and per yer. We have unpaid. The perty and right these taxedue.	evenue laities) made refore, ghts to		SECONDATE OF STATE	14 MAR 13 P	75 AT O
Residence		F STATE FLORIDA	PM 1:24	*****					
unless notice	of the lien is refile following such dat	ORMATION: For ad by the date given se, operate as a ce	in column	(e), this notic	e shall,				
Kind of Tax (a)	Tax Period Ending (b)	identifying Num	ber A	Date of ssessment (d)	Re	Day for filing (e)	Unpald Ba of Assessi (f)		
		·				14FLF	:000276	64 -	~
Place of Filing	SECRET	TARY OF STAT				Total	\$ 47	752.0)8
	vas prepared and	signed at		IMORE, MI)			, on 1	this,
· ·		uthorized by law to tal	ka acknowl	Title REVENU (954) edgment is not	423-78	316		02-3 Tax lien	

For Optional Use by Recording Office

10194

Form 668 (Y)(c)
(Rev. February 2004)

Area:

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

Serial Number

ien Unit Phon	ESS/SELF EMPLA Ne:(800) 913-6	OYED AREA #3	183	496015	
Code, we are have been as a demand fo there is a lie property bel additional per	e giving a notice seessed against the payment of the in favor of the longing to this tandities, interest,	that taxes (including following named is liability, but it reserved that the states on a axpayer for the amount of the costs that may reduce the costs that the costs that may reduce the costs that may reduce the costs that	g interest and per taxpayer. We hav mains unpaid. The il property and ri ount of these taxe y accrue.	nalties) e made erefore, ghts to	SECRETARY OF SECRETARY OF STREET
Residence	2170 BLC POMPANO	OUNT RD BEACH, FL 330	69-5111		STATE RATIO
unless notice	of the lien is refile following such dat	ORMATION: For ead by the date given in each operate as a certification.	olumn (e), this notic	e shall,	
Kind of Tax	Tax Period Ending (b)	Identifying Number	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
941	06/30/2015	XX-XXX2434	08/31/2015	09/30/2025 15FLR	23011.63 BO11141-6
Place of Filing	SECRET	ARY OF STATE	14	Total	\$ 23011.63
	as prepared and s	signed atB	ALTIMORE, MI)	, on this,
	. MCCLANAHA		(954) 4	3 OFFICER 123-7832	23 - 02 - 3937

Form 668 (Y)(c) (Rev. February 2004)

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

SMALL BUSINESS/SELF EMPLOYED AREA #3				
Lien Unit Phone: (800) 913-6050	231	649716		
As provided by section 6321, 6322, and 63 Code, we are giving a notice that taxes (includave been assessed against the following-name a demand for payment of this liability, but it there is a lien in favor of the United States of property belonging to this taxpayer for the additional penalties, interest, and costs that	uding interest and pe ned taxpayer. We have t remains unpaid. The on all property and ri amount of these tax	nalties) e made erefore, ghts to		16 OCT SECRETAL TALLAHAS
Name of Taxpayer ALLIED MEDICAL TRAN a Corporation	SPORT INC			FILED T 11 PM 4: 43 ETARY OF STATE HASSEE, FLORIDA
Residence 2170 BLOUNT RD POMPANO BEACH, FL 3	33069-5111			4: 43 STATE FLORIDA
IMPORTANT RELEASE INFORMATION: Fo unless notice of the lien is refiled by the date given on the day following such date, operate as a crin IRC 6325(a).	n in column (e), this notic	ce shall,		
Kind of Tax Period Kind of Tax Ending Identifying Nun (a) (b) (c)	Date of Assessment (d)		ay for iling e)	Unpaid Balance of Assessment (f)
941 09/30/2015 XX-XXX243	02/28/2016	03/3	0/2026	57366.98
			,	·
		i	.6FLRI	000868 8-0
Place of Filing SECRETARY OF STATE	E			:
TALLAHASSEE, FL 3		_	Total	\$ 57366.98
This notice was prepared and signed at the 28th day of September, 201	BALTIMORE, MD)	.,	, on this,
uay or,,				
For MS. J. LAYBOURNE	Title REVENUE (561) 6			23-02-3908

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien Rev. Rut. 71-466, 1971 - 2 C.B. 409)

Form 668(Y)(c) (Rev. 2-20)

Form 668 (Y)(c)

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

		-	-	-	-
(Rev.	February	20	00	4)	

For Optional Use by Recording Office Serial Number Area: SMALL BUSINESS/SELF EMPLOYED AREA #3 Lien Unit Phone: (800) 913-6050 163609215 As provided by section 6321, 6322, and 6323 of the Internal Revenue

Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue.

Name of Taxpayer ALLIED MEDICAL TRANSPORT INC a Corporation

Residence

2170 BLOUNT RD

POMPANO BEACH, FL 33069-5111

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
940	12/31/2013	XX-XXX2434	04/28/2014	05/28/2024	613.56
940	12/31/2014	XX-XXX2434	02/23/2015	03/25/2025	509.13
941	03/31/2014	XX-XXX2434	07/14/2014	08/13/2024	28630.48
941	06/30/2014	XX-XXX2434	10/27/2014	11/26/2024	3962.85
941	09/30/2014	XX-XXX2434	12/22/2014	01/21/2025	1909.34
				15FLR0	1006368-2
Place of Filing		ARY OF STATE		Total	\$ 35625.36
	TALLAH	ASSEE, FL 3231	4		

BALTIMORE, , on this, This notice was prepared and signed at

24th day of _ 2015

Signature MCCLANAHAN for MS. S.

REVENUE OFFICER (954) 423-7832

23-02-3937

Form 668 (Y)(c)

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

(Rev. February 2004) For Optional Use by Recording Office Serial Number Area: SMALL BUSINESS/SELF EMPLOYED AREA #3 Lien Unit Phone: (800) 913-6050 875358812 As provided by section 6321, 6322, and 6323 of the Internal Revenue Code, we are giving a notice that taxes (including interest and penalties) have been assessed against the following-named taxpayer. We have made a demand for payment of this liability, but it remains unpaid. Therefore, there is a lien in favor of the United States on all property and rights to property belonging to this taxpayer for the amount of these taxes, and additional penalties, interest, and costs that may accrue. Name of Taxpayer ALLIED MEDICAL TRANSPORT INC a Corporation Residence 5896 RODMAN ST HOLLYWOOD, FL 33023-1940 IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
940 941	12/31/2011 12/31/2011	20-4482434 20-4482434	04/23/2012 05/21/2012	05/23/2022 06/20/2022	998.07 56054.57
				12FLR()007951-7
Place of Filing	SECRET	ARY OF STATE	4	Total	\$ 57052.64

SECRETARY OF STATE TALLAHASSEE, FL 32314			\$ 57052.64
This notice was prepared and signed atBALTI	MORE, MD	_	, on this,
the15th day of,,			
Signature Coc for G. SHNEIDER	Title REVENUE OFFICER (954) 423-7779		23-02-1950

Form 668 (Y)(c) (Rev. February 2004)

Department of the Treasury - Internal Revenue Service

Notice of Federal Tax Lien

			,	
	ESS/SELF EMPLOYED AREA #3 e:(800) 913-6050	Serial Number 860290512	For Optional Use by R	ecording Office
Code, we are have been as a demand for there is a lier property below	by section 6321, 6322, and 63 giving a notice that taxes (inclusessed against the following-name payment of this liability, but in in favor of the United States conging to this taxpayer for the nalties, interest, and costs that	uding interest and penalties) ned taxpayer. We have made t remains unpaid. Therefore, on all property and rights to amount of these taxes, and	を記している。	12 APR 24
Name of Taxpa	eyer ALLIED MEDICAL TRAN a Corporation	NSPORT INC	(2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	PR IT
Residence	5896 RODMAN ST HOLLYWOOD, FL 33023	3-1940		9

IMPORTANT RELEASE INFORMATION: For each assessment listed below, unless notice of the lien is refiled by the date given in column (e), this notice shall, on the day following such date, operate as a certificate of release as defined in IRC 6325(a).

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number (c)	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
1120 1120 1120	12/31/2008 12/31/2008 12/31/2009	20-4482434	02/15/2010 02/20/2012 09/20/2010	03/16/2020 03/22/2022 10/20/2020	20763.15
1120 941	12/31/2009 06/30/2011	20-4482434	02/20/2012	03/22/2022 12/21/2021	197644.02
941 941	06/30/2011 09/30/2011	20-4482434	12/05/2011 12/12/2011	01/04/2022 01/11/2022	14613.11
941	09/30/2011	20-4482434	02/13/2012	03/15/2022	17303.17
				i.2FLR	0004861-1
Place of Filing SECRETARY OF STATE					
	TALLAH	ASSEE, FL 3231	4	Total	\$ 250323.45

,		
This notice was prepared and signed at	BALTIMORE, MD	, on this,
theday of _April, _2013	2 -	
Signature Coc for G. SHNEIDER	Title REVENUE OFFICER (954) 423-7779	23-02-1950

Attachment 19 Exhibit 3

ELECTRONIC JUDGMENT LIEN CERTIFIC AF 29 of 39

FOR PURPOSES OF FILING A JUDGMENT LIEN. THE FOLLOWING INFORMATION IS SUBMITTED IN ACCORDANCE WITH s. 55.203, F.S.,

JUDGMENT DEBTOR (DEFENDANT) NAME(S) AS SHOWN ON JUDGMENT LIEN:

EXECUTIVE RIDE TRANSPORT, INC. 2170 BLOUNT RD POMPANO BEACH, FL. 330695111

FEI#: 47-5503298 DOS DOCUMENT#: P15000083639

J18000801639 FILED 8:00 AM December 12, 2018 Secretary of State

JUDGMENT CREDITOR (PLAINTIFF) NAME AS SHOWN ON JUDGMENT LIEN OR CURRENT OWNER OF JUDGMENT IF ASSIGNED:

STATE OF FLORIDA, DEPARTMENT OF REVENUE CORAL SPRINGS SERVICE CENTER 3301 N UNIVERSITY DR STE 200 CORAL SPRINGS FL330654149 DOS DOCUMENT#: 593476898

NAME AND ADDRESS TO WHOM ACKNOWLEDGMENT/CERTIFICATION IS TO BE MAILED:

DOR GENERAL COUNSEL'S OFFICE

AMOUNT DUE ON MONEY JUDGMENT: 748.36

APPLICABLE INTEREST RATE: 0.00% NAME OF COURT: BROWARD CASE NUMBER: 1000000804842 DATE OF ENTRY: 11/21/18

WAS A WRIT OF EXECUTION DOCKETED ON THIS JUDGMENT LIEN WITH ANY SHERIFF PRIOR TO OCTOBER 1, 2001?

() YES (IF YES, A "CREDITOR AFFIDAVIT CERTIFICATION" FORM MUST BE ATTACHED TO THIS CERTIFICATE.)

(X) NO

UNDER PENALTY OF PERJURY, I hereby certify that: (1) The judgment above described has become final and there is no stay of the judgment or its enforcement in effect; (2) All of the information set forth above is true, correct, current and complete; (3) I have not previously filed a Judgment Lien Certificate regarding the above judgment with the Department of State; and, (4) I have complied with all applicable laws in submitting this Electronic Judgment Lien Certificate for filing.

Electronic Signature of Creditor or Authorized Representative: DOR GENERAL COUNSEL'S OFFICE

Page 39 of 39

16999

Department of the Treasury - Internal Revenue Service

Form 668 (Y)(c)

Notice of Endoral Tax Lien

Rev. February 2004)	Not	ice of rederal lax Lies	······································
Area: MALL BUSINESS ien Unit Phone: (/SELF EMPLOYED AREA #3 800) 913-6050	Serial Number 319622118	For Optional Use by Recording Office
Code, we are given have been assess a demand for pathere is a lien in property belong	section 6321, 6322, and 63 ving a notice that taxes (inclused against the following-name syment of this liability, but it is favor of the United States of ing to this taxpayer for the ties, interest, and costs that	uding interest and penalties) led taxpayer. We have made t remains unpaid. Therefore, on all property and rights to amount of these taxes, and	
lame of Taxpayer	EXECUTIVE RIDE TRAN a Corporation	ISPORT	Co. 3 conveyed
Residence	2170 BLOUNT RD POMPANO BEACH, FL 3	33069-5111	Secretary of the second
unless notice of t	RELEASE INFORMATION: For the lien is refiled by the date giver wing such date, operate as a c	n in column (e), this notice shall,	C:

Kind of Tax (a)	Tax Period Ending (b)	Identifying Number	Date of Assessment (d)	Last Day for Refiling (e)	Unpaid Balance of Assessment (f)
940	12/31/2017		03/05/2018	04/04/2028	136.20
941	12/31/2017	XX-XXX3298	03/05/2018	04/04/2028	2676.91
				18FLF	0005752-4
Place of Filing		TARY OF STATE			
	TALLA	HASSEE, FL 3231	L4	Total	\$ 2813.11

TALLAHASSEE, FL 323	314	
This notice was prepared and signed atE	BALTIMORE, MD	, on this,
the15th day ofAugust, 2018		
Signature Joan Flack for E. ROSAS	Title REVENUE OFFICER (954) 991-4348	23-08-3210

(NOTE: Certificate of officer authorized by law to take acknowledgment is not essential to the validity of Notice of Federal Tax lien Rev. Rul. 71-466, 1971 - 2 C.B. 409)