



Interoffice Memorandum

AGENDA ITEM

September 7, 2023

TO: Mayor Jerry L. Demings
-AND-
County Commissioners

THRU: Raul Pino, MD, MPH, Director
Health Services Department

 MD. MPH.

FROM: Christian C. Zuver, M.D., Medical Director
EMS Office of the Medical Director
Contact: (407) 836-7611

SUBJECT: Paratransit Services License
Jean Louis Enterprises, LLC dba JL Reliable Transport
Consent Agenda – September 26, 2023

The EMS Office of the Medical Director requests approval and execution of the Paratransit Services License for Jean Louis Enterprises, LLC dba JL Reliable Transport. Jean Louis Enterprises, LLC dba JL Reliable Transport has submitted an application for an Alternative Transportation Service/Paratransit license to provide wheelchair/stretchers service within Orange County. The EMS Office of the Medical Director has determined that Jean Louis Enterprises, LLC dba JL Reliable Transport has met the prerequisites for licensure as an alternative transportation service in accordance with Section 20-132 of the Orange County Code. Public notice of this application has been posted and EMS has not received any objections.

ACTION REQUESTED: Approval and execution of the Paratransit Services License for Jean Louis Enterprises, LLC dba JL Reliable Transport to provide wheelchair/stretchers service. The term of this license shall be from September 26, 2023, and terminate on September 25, 2025. There is no cost to the County. **(EMS Office of the Medical Director)**

CCZ/jj

Attachments



PARATRANSIT SERVICES: RECEIVED

APPLICATION FOR LICENSE DATE: 7/28/23

INITIALS: [Signature]

APPLICATION DATE: 07 28 2023

PROPOSED DATE OPERATIONS WILL BEGIN: 07

SECTION I: GENERAL INFORMATION

1. NAME OF SERVICE: Jean Louis Enterprises LLC dba JI Reliable transport

2. BUSINESS ADDRESS (INCLUDE COUNTY):

2295 S Hiawasse Rd, #104
Orlando, FL 32835

3. CONTACT INFORMATION: Business Phone (844) 321-1717

Mobile Phone (407) 879-7042

Email contact@jltr.com

4. OWNERSHIP TYPE: PRIVATE CORPORATION GOVERNMENT AGENCY OTHER

a. If other, please describe: _____

5. CORPORATE OFFICERS AND DIRECTORS:

<u>NAME</u>	<u>ADDRESS</u>	<u>POSITION</u>
Judson Jean Louis	2295 s Hiawasse rd, orlando, fl	CEO/ manager
Lunel Piere	2295 S Hiawasse rd	Oporations
Nellie Jean Baptiste	2295 S Hiawasse rd	Administration

6. LEVEL OF SERVICE: WHEELCHAIR STRETCHER BOTH

7. COMMUNICATIONS EQUIPMENT: TELEPHONE TWO-WAY RADIO OTHER

a. If other, please describe: _____

SECTION II: REQUISITES TO OBTAINING LICENSE**1. PAYMENT OF ALL APPLICABLE FEES:** YES, DATE: 07/20/2023 NO**2. VEHICLE INSPECTION COMPLETED BY EMS OFFICE:** YES, DATE: _____ NO**3. REFERENCES/LETTERS OF SUPPORT SUBMITTED TO EMS OFFICE (Attachment I):**

- Verifiable business or work references for 5 years, including one notarized letter of reference
- Five verifiable personal/business references, including two notarized letters of reference
- Five verifiable credit references, including two notarized letters of reference

4. CURRENT NOTARIZED FINANCIAL STATEMENT SUBMITTED TO EMS OFFICE: YES, DATE: 07/22/2023 NO

Example: Current letter from bank verifying business account status (no account numbers please).

5. PROOF OF INSURANCE SUBMITTED TO EMS OFFICE: YES, DATE: 07/20/2023 NO**SECTION III: VEHICLES AND STAFFING****1. NUMBER OF VEHICLES IN OPERATION:** 3**2. EMPLOYEE ROSTER:**

<u>NAME</u>	<u>CURRENT CPR CARD (Y/N)</u>
Judson Jean Louis	Yes
Nellie Jean Baptiste	Yes
Lunel Pierre	Yes

ATTACHMENT I: REFERENCES

- 1. List previous business experiences or work history for last five years. Submission of one notarized letter of reference from list below is required.**

New Hope SDA
Right At Home
Faithful mobility transport

- 2. List five personal or business references. Submission of two notarized letters of reference from list below is required.**

NAME	ADDRESS	PHONE
Reliable translators	775 S Kirkman Rd #2068, Orlando, FL 32811	(321) 231-1154
MME1040 Service Center	6100 Old Winter Garden Rd, Orlando, FL 32835	(321) 202-8435
Build hope transportation	2880 Mine & Mill Rd Lakeland, FL 33801	(863) 500-2705
Piece of Pie Investment	4718 Montauk St Orlando, FL 32808	(321) 460-7795
Health and Wellness AI. LLC	10017 park place ave, Riverview, FL 33578	(813) 252-1775

- 3. List five credit references. Submission of two notarized letters of reference from list below is required.**

NAME	ADDRESS	PHONE
Salnave LAGUERRE	2671 VILLAGIO BLVD, SAINT CLOUD, FL 34772	(321) 945-0100
Carine PIERRE	12308 gilmerton mist lane Reverview FL 33579	(954) 880-4034
Johanson DYE	7512 FORDHAM CREEK LN ORLANDO, FL 32818	(407) 364-2836
Jean Robert NOEL	4444 S Rio grande ave, apt 862B Orlando Fl 32839	(407) 879-0845
Rodin NIVOL	4093 Dijon Drive ORLANDO, FL 32808	(239) 440-0973



PARATRANSIT SERVICES:
APPLICATION FOR LICENSE

I, the undersigned representative of the service named in this application, do hereby attest the information provided in this application is truthful and honest to the best of my knowledge, and that my service meets all of the requirements for operation of a paratransit services in Orange County and the State of Florida. I acknowledge that as provided in Orange County Code of Ordinances Chapter 20, Division 3, Section 20-137, licenses obtained by an application in which any material fact was intentionally omitted or falsely stated are subject to revocation.

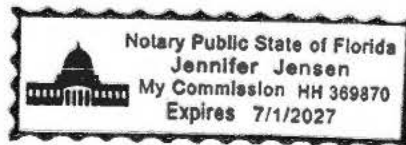
[Handwritten Signature]

SIGNATURE OF APPLICANT OR REPRESENTATIVE

07 28 2023

DATE

NOTARY SEAL



[Handwritten Notary Signature]

NOTARY SIGNATURE

Driver's license #



License

Paratransit Services

Orange County
Board of County Commissioners
Emergency Medical Services

This is to certify that JEAN LOUIS ENTERPRISES, LLC D/B/A JL RELIABLE TRANSPORT
has complied with the Orange County Code 2001-09 and Rules and Regulations
established by the Board of County Commissioners and is authorized to operate a Paratransit Service in
Orange County.

Date of Issue: September 26, 2023

Date of Expiration: September 25, 2025

Bryan W. Burt
Mayor, Board of County Commissioners

