

HANNIGAN LAW FIRM PLLC

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Terence S. Hannigan
Timothy C. Hannigan

Jaime L. Cornell
Practice Manager

November 6, 2025

Bureau of Emergency Medical Services and Trauma Systems
Central Office
875 Central Avenue
Albany, NY 12206-1388
(See additional services below)

Re: Application of Brave GAC
Holdings, LP
Our File: 2025-00725

Dear Sirs:

This firm represents Brave GAC Holdings, LP relative to a change in ownership at the upper-most holding company level, only, relative to the Ambulance Agency Operating Certificates set forth below. Following the closing of the Proposed Transaction as described in the Letter of Intent annexed hereto, Brave GAC Holdings, LP will own 100% of the equity interest of the existing underlying companies and (ii) the underlying Company EINs, names and business operations will remain the same.

All current ambulance operations, as well as the corporations holding the Certificates of Operating Authority on file with the New York State Department of Health, will remain unchanged. No Certificate of Operating Authority is being transferred herewith; the change in ownership is with respect to the limited partnership that is the upper-most holding company for the existing agencies, Empress Ambulance Service, LLC, and Emergacare NY, LLC.

This application affects the following NYSDOH Agency Codes in the regions set forth below:

HVREMSCO:	1287, 5930
Westchester REMSCO:	0670, 1287, 5930
NYCREMSCO:	0670, 5930

Pursuant to Public Health Law § 3010 (2) (b), "any change in a partnership which is the owner of an ambulance service shall be approved based upon a determination that the new partner or partners are competent and fit to operate the service. The remaining partners shall not be subject to a character and fitness review."

The purpose of this application is to confirm the Fitness and Competency of the principals of the new holding company, Brave GAC Holdings, LP. Affirmations of Fitness

and Competency are contained herein for each member of the post-closing Board, identified as William Gumina, Benjamin Oxnard, Eric Kim, Jeffrey Shullaw, and Herman Schwarz. Please note that this entity is not a publicly traded corporation. Brave GAC Holdings, LP is a Delaware Limited Partnership which is authorized to do business in New York pursuant to Business Corporation Law § 1304.

The new Brave GAC Holdings, LP Board will serve as the Board for all downstream Paramedics Logistics and AMCP entities depicted on the post-closing organization chart contained within this application. The existing day-to-day operations persons at the Empress and Emergacare, and entities below the holdings company line will remain unchanged.

The requisite Transfer Application fee applicable to each Regional Emergency Medical Services Council is transmitted herewith.

Thank you for your attention.

Very truly yours,



TIMOTHY C. HANNIGAN

TCH:jlc

To: Westchester Regional EMS Council, Incorporated
4 Dana Road
Valhalla, NY 10595

Regional EMS Council of NYC, Inc.
475 Riverside Drive, Suite 1929
New York, NY 10115

Hudson Valley Regional EMS Council
33 Airport Center Drive, Suite 204
New Windsor, NY 12553

Cc: Karen Taddeo, Esq.
Taddeo, Shahan & Reisner, LLP
Attorneys for Transferor
120 E Washington Street, Suite 400
Syracuse, NY 13202

Application for Transfer of Ownership regarding:

**Emergacare NY, LLC d/b/a Empress Emergency
Ambulance Services (CON No. 0670)**

**Empress Ambulance Service, LLC d/b/a Emergacare NY,
EMPRESS Ambulance Services, Montefiore d/b/a EMStar
Ambulance, Moblemedic EMS, Moble Life, and Empress
EMS (CON No. 5930)**

To

Brave GAC Holdings, LP

**PREPARED FOR:
New York State Department of Health
Regional Emergency Medical Services Council
Of New York City**

**PREPARED BY:
Timothy C. Hannigan, Esq.
Hannigan Law Firm PLLC
November 7, 2025**

TABLE OF CONTENTS

- EXHIBIT A: Application for Transfer of Ownership (DOH Form 3777)**
- Statement of Purpose and Intent for Transfer and Post-Closing Organizational Chart signed by both parties
 - Certificates of Incorporations for Emergacare NY, LLC (CON No. 0670) and Empress Ambulance Service, LLC (CON No. 5930)
 - Financial Information and First Year Budget
 - Map of primary operating territory
- EXHIBIT B: List of deficiency notices and malpractice actions issued within the past 10 years**
- Exhibit 1 – Order on Agreed Settlement
- EXHIBIT C: Listing of all capital, property, plant, equipment, receivables, and stock owned by the certificate holder**
- EXHIBIT D: Statement of Final Owner**
- Exhibit 1 – Certificate of Limited Partnership of Brave GAC Holdings, LP and Application for New York State Authority to Operate
 - Exhibit 2 – Grant Avenue Capital Portfolio Summary for Project Brave
- EXHIBIT E: Certificate of Operating Authority presently held by Emergacare NY, LLC (CON No. 0670) and Empress Ambulance Service, LLC (CON No. 5930)**
- EXHIBIT F: Affirmations of Fitness and Competency (DOH Form 3778)**

Exhibit A

Application for Transfer of Ownership (DOH Form 3777)

Application for New Service, Expansion of Primary Operating Territory or Transfer of Ownership

Application for (check one)

- ☐ New service (Sections A,B,C,D,F)
☐ Expansion of Primary Operating Territory for existing service (Sections A,B,C,D,F)
☒ Transfer of existing service operating authority (Sections A,D,E,F)

Type of Service (check one)

- ☒ Ambulance
☐ ALS First Responder

Section A Organizational Structure

For a corporation, attach a copy of certificate of incorporation, any DBAs and a listing of all owners' stockholders, principals, investors and/or parent corporations or sub-corporations. For LLC attach a copy of NYS DOS Application For Authority.

Name of Service	DOH Agency Code	Federal Employer Identification Number		
Emergacare NY LLC	0670	13-4201508		
Address	City	State	Zip	County
722 Nepperhan Ave	Yonkers	NY	10703	Westchester
Contact Person	Title			
Daniel Minerva	Vice-President/Operations			
Business Phone	Home Phone	Cell Phone	E-mail	
(914) 965- 5040	(914)	(914)	dminerva@empressems.com	

Current Organizational Sponsor Type

- ☒ Proprietary ☐ Hospital Based ☐ Volunteer Independent ☐ Industrial
☐ Volunteer Fire Department ☐ Municipal/Government ☐ Other

Type of Ownership

- ☐ Individual ☐ Partnership ☐ Government ☐ Corporation ☒ LLC

Name of Individual Owner, Partners, Corporation or Government Entity (attach a listing of any/all owners of 10% or more stock)

Paramedics Logistics Operating Company LLC dba PatientCare Logistics Solutions

Section B Primary Operating Territory

Specify geographic area requested using municipal, political or other identifiable Boundaries. Attach a detailed map of the primary service area. Statements such as "surrounding, adjacent, vicinity, proximity, contiguous, adjoining, or portions of, etc." are not acceptable when defining a primary operating territory.

Proposed new or expanded primary operating territory

For expansion list existing primary operating territory

Section C Financial Responsibility

Applicant is required to attach detailed fiscal and budgetary information as specified in the current DOH Policy Statement. An initial start-up or continuation budget and sufficient financial information as well as the source of such must be provided to insure the fiscal responsibility and stability of the ownership for the territory served.

Insurance Carrier

Agent	Business Phone () -
-------	-------------------------

Types and Limits of Coverage ☐ General Liability ☐ Other

Section D Description of Proposed Services

For a corporation attach a certificate of incorporation, any DBAs and a listing of all owners, stockholders or principals.

Level of Service (check only one)

☐ EMT

☐ AEMT

☐ Critical Care

☒ Paramedic

Agency Medical Director

Address

City

State

Phone Number

Dr. Barry Smith

41 Jayson Ave

Great Neck

NY

(773) 332 - 2136

Agency Providing Medical Control

Phone Number

St. Joseph's Hospital 127 So. Broadway, Yonkers, New York

(914) 965 - 0136

System Medical Director

Address

City

State

Phone Number

Dr. Josef Schenker

475 Riverside / NYREMAC

New York

NY

(212) 870 - 2301

Size of Population to be Served

Days of operation

Hours of operation

3,990,000

365 days per year

24 hours per day

Projected Call Volume

Total 165,746

Emergency 105,415

Non-Emergency 59,330

Source of Statistics for Call volume

☐ PCR

☐ Dispatch Center

☐ Agency Call Record

☒ Other combined Express & Emergacare

Total no. of ambulances

Total no. of emergency ambulance service vehicles (EASV'S)

Total no. of ALS First Response vehicles

170

34

0

(combined)

Section E Proposed Organizational Structure

For a corporation attach a copy of certificate of incorporation for any DBAs listing of all owners' stockholders, principals, investors and/or parent corporations or sub-corporations. For LLC attach a copy of NYS DOS Application For Authority.

Proposed Name of Service

Federal Employer Identification Number

Emergacare NY LLC

13-4201508

Address

City

State

Zip

County

722 Nepperhan Ave

Yonkers NY

10703

Westch.

Contact Person

Title

Daniel Minerva

VP/Operations

Business Phone

Home Phone

Cell Phone

E-mail

(914) 965 - 5040

(914)

(914)

dminerva@empressems.com

Proposed Organizational Sponsor Type

☒ Proprietary

☐ Hospital Based

☐ Volunteer Independent

☐ Industrial

☐ Volunteer Fire Department

☐ Municipal/Government

☐ Other

Proposed Type of Ownership

☐ Individual

☐ Partnership

☐ Government

☐ Corporation

☒ LLC

Name of Proposed Individual Owner, Partners, Corporation or Government Entity (attach any/all owners of 10% or more stock)

Paramedics Logistics Operating Company LLC dba PatientCare Logistics Solutions

Section F Certification of Accuracy and Ownership Competency

As owner/CEO/operator of the ambulance service described herein I attest to the accuracy of the information contained in this application and its attachments and to having received and read Public Health Law Article 30 and State EMS Code Part 800. I also state that neither the corporation nor any of the owners, principals or stockholders in the corporation, or LLC members, have been convicted of Medicare or Medicaid fraud. I understand that under Section 3012(a) of the PHL Article 30 that the ambulance service or ALS FR service certificate for this agency may be revoked, suspended limited or annulled if this application includes willful misrepresentation.

Attachments Required

- Detailed narrative to support need or statement of purpose and intent for transfer
- Affirmation of Fitness and Competence (DOH-3778)
- DOS Certificate of Incorporation or Authority, DBA's, owners, partners, shareholders or members listing
- Financial information including funding budget and insurance
- Primary operating territory map

Name of Owner or CEO

Title

Herman Schwarz

Board Member

Signature

Date

Notary Public affirmation and acknowledgment



FOR REGIONAL EMS COUNCIL USE ONLY

Date Application Received

Date of Council Decision

☐ Approved ☐ Denied ☐ Rejected - Incomplete

Council Chair Signature

Application for New Service, Expansion of Primary Operating Territory or Transfer of Ownership

Application for (check one)

- ☐ New service (Sections A,B,C,D,F)
☐ Expansion of Primary Operating Territory for existing service (Sections A,B,C,D,F)
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☐ ALS First Responder

Section A Organizational Structure

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Name of Service	DOH Agency Code	Federal Employer Identification Number		
Empress Ambulance Service LLC	5930	13-2646815		
Address	City	State	Zip	County
722 Nepperhan Ave	Yonkers	NY	10703	Westchester
Contact Person	Title			
Daniel Minerva	Vice-President/Operations			
Business Phone	Home Phone	Cell Phone	E-mail	
(914) 965- 5040	(914) [REDACTED]	(914) 4 [REDACTED]	dminerva@empressems.com	
Current Organizational Sponsor Type				
☒ Proprietary	☐ Hospital Based	☐ Volunteer Independent	☐ Industrial	
☐ Volunteer Fire Department	☐ Municipal/Government	☐ Other		
Type of Ownership				
☐ Individual	☐ Partnership	☐ Government	☐ Corporation	☒ LLC

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Paramedics Logistics Operating Company LLC dba PatientCare Logistics Solutions

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Agent

Business Phone
() -

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☐ General Liability

☐ Other

Section D Description of Proposed Services

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State

Phone Number

Dr. Barry Smith

41 Jayson Ave

Great Neck

NY

(773) 332 - 2136

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Phone Number

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System Medical Director

Address

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Dr. Josef Schenker

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Total no. of ambulances

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(combined)

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Federal Employer Identification Number

Empress Ambulance Service, LLC

13-2646815

Address

City

State

Zip

County

722 Nepperhan Ave

Yonkers NY

10703

Westch.

Contact Person

Title

Daniel Minerva

VP/Operations

Business Phone

Home Phone

Cell Phone

E-mail

(914) 965 - 5040

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dminerva@empressems.com

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☐ Industrial

☐ Volunteer Fire Department

☐ Municipal/Government

☐ Other

Proposed Type of Ownership

☐ Individual

☐ Partnership

☐ Government

☐ Corporation

☒ LLC

Name of Proposed Individual Owner, Partners, Corporation or Government Entity (attach any/all owners of 10% or more stock)

Paramedics Logistics Operating Company LLC dba PatientCare Logistics Solutions

Section F Certification of Accuracy and Ownership Competency

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Attachments Required

- Detailed narrative to support need or statement of purpose and intent for transfer
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- DOS Certificate of Incorporation or Authority, DBA's, owners, partners, shareholders or members listing
- Financial information including funding budget and insurance
- Primary operating territory map

Name of Owner or CEO

Title

Herman Schwarz

Board Member

Signature

Date

Notary Public affirmation and acknowledgment



FOR REGIONAL EMS COUNCIL USE ONLY

Date Application Received

Date of Council Decision

☐ Approved ☐ Denied ☐ Rejected - Incomplete

Council Chair Signature

Statement of Purpose and Intent and Post-Closing Organizational Chart



NON-BINDING
SUBJECT TO DILIGENCE AND CONTRACT

CONFIDENTIAL

October 23, 2025

Patientcare EMS

Attn: Peter Siebrecht, Ryan Duane, and Derek Beres

Via Email

Dear Mr. Siebrecht, Mr. Duane, and Mr. Beres,

Grant Avenue Capital, LLC ("Grant Avenue Capital") is pleased to submit this non-binding proposal (the "Proposal") in connection with the acquisition (the "Proposed Transaction") by Brave GAC Holdings, LP ("Buyer") of Paramedics Logistics Holding Company, LLC ("PatientCare" or the "Company"). Following the closing the Proposed Transaction, (i) Buyer and its subsidiaries will own 100% of the equity interest of the Company and (ii) the Company's EIN, name and business operations will remain the same.

The key terms of the Proposal are as follows:

1. Purchase Price.

Based on the materials and other information provided to date, Grant Avenue Capital proposes to consummate the Proposed Transaction based upon an aggregate purchase price of \$ [REDACTED] (the "Enterprise Value"). The Enterprise Value assumes the following:

- 1) The Company is on track to achieve 2025E Adj. EBITDA of \$ [REDACTED]
- 2) The Company is delivered debt-free / cash-free and has an appropriate level of net working capital at closing determined in accordance with GAAP and accrual basis of accounting
- 3) Members of Company management will reinvest \$ [REDACTED] of what they would otherwise have received as cash consideration, and in return they will receive equity in the Buyer.

**NON-BINDING
SUBJECT TO DILIGENCE AND CONTRACT**

2. POST-CLOSING STRUCTURE

The structure of the Buyer and the Company following the closing of the Proposed Transaction is attached hereto as Exhibit A.

3. MANAGEMENT

At the closing of the Proposed Transaction, the board of managers of the Company (the "Board") shall not have more than five members.¹

4. CONDITIONS AND APPROVALS

Consummation of the Proposed Transaction on the terms noted above will be subject to, but not limited to, the following:

- a. Negotiation and execution of mutually acceptable definitive transaction agreements; and
- b. Receipt of required governmental approvals and third-party consents.

5. OTHER MATTERS

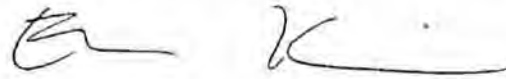
- a. Authority: Each signatory to this letter represents and warrants that he or she possesses all necessary capacity and authority to act for, sign, and bind themselves and any respective entity on whose behalf he or she is signing.
- b. Confidentiality: All parties shall, and shall cause their respective shareholders and advisors, to keep the existence of this letter agreement, including its terms and parties involved, in strict confidence.
- c. Governing Law: This letter agreement shall be interpreted according to, and governed by, the laws of the State of Delaware. This letter agreement may be executed in any number of counterparts, each of which when executed and delivered shall be an original, but all of which shall together constitute one and the same instrument. EACH OF THE COMPANY AND GRANT AVENUE CAPITAL KNOWINGLY, VOLUNTARILY AND INTENTIONALLY WAIVE ANY RIGHT THEY MAY HAVE TO A TRIAL BY JURY ARISING OUT OF, UNDER OR IN CONNECTION WITH THIS LETTER AGREEMENT OR THE PROPOSED TRANSACTION CONTEMPLATED HEREBY.
- d. Non-Binding Nature: With the exception of the provisions under "Section 6. Other Matters" above, this letter is non-binding on the part of the parties hereto and subject to the various terms described herein, including the execution of definitive agreements. Neither party shall have any liability to the other party for failure to enter into such definitive agreements for any reason or no reason.

[Signature Page Follows]

IN WITNESS WHEREOF, the parties hereto have executed this letter agreement as of the day and year first above written.



Buddy Gumina
Founder and Managing
Partner Grant Avenue
Capital, LLC Email:
Buddy@GrantAve.com
Cell: 917.693.0712



Eric Kim
Principal
Grant Avenue Capital, LLC
Email:
Eric.Kim@GrantAve.com
Cell: 201.693.8988

AGREED AND ACCEPTED:

Paramedics Logistics Holdings Company, LLC

By: _____
Name:
Title:

**NON-BINDING
SUBJECT TO DILIGENCE AND CONTRACT**

IN WITNESS WHEREOF, the parties hereto have executed this letter agreement as of the day and year first above written.

Buddy Gumina
Founder and Managing
Partner Grant Avenue
Capital, LLC Email:
Buddy@GrantAve.com
Cell: 917.693.0712

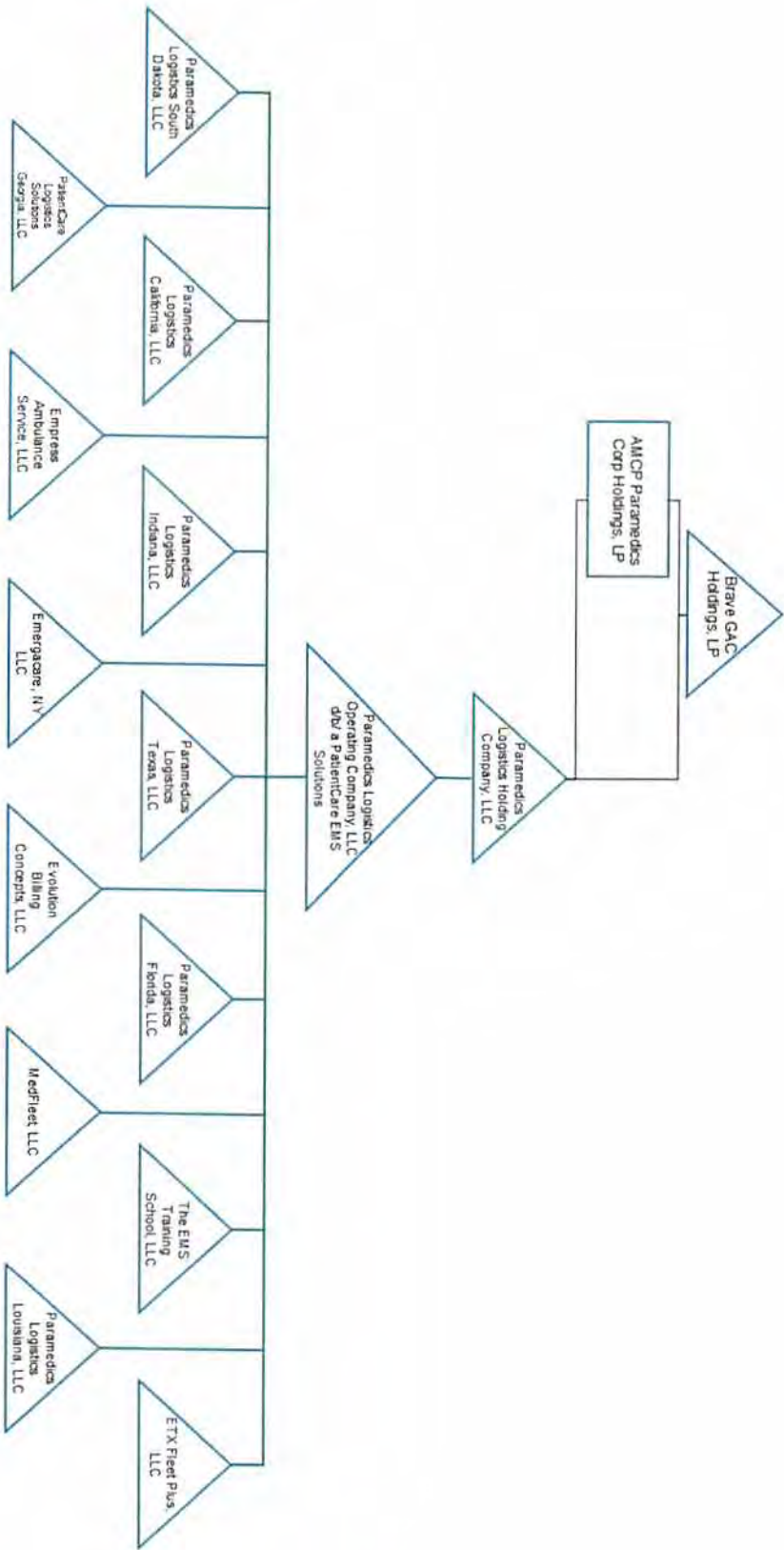
Eric Kim
Principal
Grant Avenue Capital, LLC
Email:
Eric.Kim@GrantAve.com
Cell: 201.693.8988

AGREED AND ACCEPTED:

Paramedics Logistics Holdings Company, LLC

By: 
Name: Robert Haisch
Title: Authorized Signatory

NON-BINDING
SUBJECT TO DILIGENCE AND CONTRACT
EXHIBIT A



**Certificates of Formation
and
Articles of Organization**

•

Emergacare NY, LLC
Articles of Organization

**STATE OF NEW YORK
DEPARTMENT OF STATE**

I hereby certify that the annexed copy for EMERGACARE, NY LLC, File Number 011204000777 has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.

WITNESS my hand and official seal of the
Department of State, at the City of Albany,
on October 30, 2025.

WALTER T. MOSLEY
Secretary of State



Brendan C. Hughes

BRENDAN C. HUGHES
Executive Deputy Secretary of State

Authentication Number: 100009044226 To Verify the authenticity of this document you may access the
Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>

12/04/01 TUE 12:13 FAX 203 327 0088

DURKYN & POLERA PC

DURKYN & POLERA PC

011204000777

CSC 45

New York State
Department of State
Division of Corporations, State Records
and Uniform Commercial Code
Albany, NY 12221

ARTICLES OF ORGANIZATION OF

NATIONAL EMERGENCY AMBULANCE SERVICES, LLC

Under Section 203 of the Limited Liability Company Law

FIRST: The name of the limited liability company is: National Emergency Ambulance Services, LLC

SECOND: The county within this state in which the office of the limited liability company is to be located is: Westchester

THIRD: The Secretary of State is designated as agent of the limited liability company upon whom process against it may be served. The address within or without this state to which the Secretary of State shall mail a copy of any process against the limited liability company served upon him or her is:

National Emergency Ambulance Services, LLC

722 Nepperhan Avenue

Yonkers, New York 10703


(signature)

Michael Minerva, President
(name and capacity of signer)

011204000779

CSC 45

ARTICLES OF ORGANIZATION
OF
NATIONAL EMERGENCY AMBULANCE SERVICES, LLC

Section 203 of the Limited Liability Company Law

FILED

2001 DEC -4 PM 4:14

Filed: John Polera, Esq
Durkin & Polera, P.C.
970 Summer St
1st Fl
Stamford, CT 06905
Cust. Ref#561379/KZB

DRAWDOWN

[Handwritten signature]

STATE OF NEW YORK
DEPARTMENT OF STATE

DEC 04 2001

FILED
TAXES
BY: *[Signature]*

2001 DEC -4 PM 4:05

RECEIVED

011204000779

2

**STATE OF NEW YORK
DEPARTMENT OF STATE**

I hereby certify that the annexed copy for EMERGACARE, NY LLC, File Number 020308000234 has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.

WITNESS my hand and official seal of the
Department of State, at the City of Albany,
on October 31, 2025.

WALTER T. MOSLEY
Secretary of State



Brendan C. Hughes

BRENDAN C. HUGHES
Executive Deputy Secretary of State

Authentication Number: 100009046505 To Verify the authenticity of this document you may access the
Division of Corporation's Document Authentication Website at <http://ecorp.dos.ny.gov>

CERTIFICATE OF AMENDMENT 020300000

OF THE

ARTICLES OF ORGANIZATION

OF

NATIONAL EMERGENCY AMBULANCE SERVICES, LLC

Under Section 211 of the Limited Liability Company Law

FIRST: The name of the limited liability company is
NATIONAL EMERGENCY AMBULANCE SERVICES, LLC

SECOND: The date of filing of the articles of organization
is 12/4/2001.

THIRD: The amendments effected by this certificate of
amendment are as follows: To change the name of the LLC.

Paragraph First of the Articles of Organization dealing
with the name of the LLC is hereby amended to read as
follows:

1 " The name of the LLC is: emergacare, ny llc."

/s/ Michael Minerva
(signature)

Michael Minerva, Member
(name and capacity of signer)

DAV

020308000

234

CSC 45

CERTIFICATE OF AMENDMENT

OF

NATIONAL EMERGENCY AMBULANCE SERVICES, LLC

Under Section 211 of the Limited Liability Company Law

STATE OF NEW YORK
DEPARTMENT OF STATE

FILED MAR 08 2002

TAX \$

BY:

FILED BY:

DURKIN & POLERA, P.C.

970 Summer St

1st Fl

Stamford, CT

Cust. Ref#441987DAV

60:6 HV 8-8VH 2002
MAR 8 9:09 AM
06905

RECEIVED

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**Empress Ambulance Service, LLC
Certificate of Incorporation**

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF FORMATION OF "EMPRESS AMBULANCE SERVICE, LLC", FILED IN THIS OFFICE ON THE TWENTY-EIGHTH DAY OF FEBRUARY, A.D. 2019, AT 11:55 O'CLOCK A.M.



7301268 8100
SR# 20191563291

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202346535
Date: 02-28-19

State of Delaware
Secretary of State
Division of Corporations
Delivered 11:55 AM 02/28/2019
FILED 11:55 AM 02/28/2019
SR 20191563291 - File Number 7381268

State of Delaware
Certificate of Formation
of

Empress Ambulance Service, LLC

Under Section 18-201 of the Delaware Limited Liability Company Act

FIRST: The name of the limited liability company is Empress Ambulance Service, LLC (the "Company").

SECOND: The address of the Company's registered office in the State of Delaware is 251 Little Falls Drive, Wilmington, DE 19808, County of New Castle. The name of its registered agent at such address is Corporation Service Company.

IN WITNESS WHEREOF, this Certificate of Formation has been subscribed this 28th day of February, 2019 by the undersigned who affirms that the statements made herein are true and correct.



Michael Minerva, Authorized Person

800169

CERTIFICATE OF INCORPORATION

of

EMPRESS AMBULANCE SERVICE, INC.

Pursuant to Section 402 of the Business Corporation Law.

The undersigned, for the purpose of forming a business corporation under Section 402 of the Business Corporation Law, does hereby make and subscribe, certify, acknowledge and file, this Certificate as follows:

FIRST: The name of the corporation shall be EMPRESS AMBULANCE SERVICE, INC.

SECOND: The purposes for which it is to be formed are the following:

To operate, own and maintain ambulances and to own and lease or sell ambulances, hospital equipment and miscellaneous items needed for the sick and injured, and to maintain an oxygen sale and service, all of which shall be for either private or public use subject, however, to the proper licensing necessary to so operate by the State of New York.

To purchase, lease or otherwise acquire and hold lands, buildings, tenements, ~~factories and real estate~~ for the plant, offices, workshops, warehouses, laboratories and manufactories of the company and to lease, mortgage and convey such real estate in such manner as may appear to be for the best interest of the company.

To make and enter into contracts pertaining to its business with any individual, firm, association or corporation, private, public or municipal, and with the Government or public authorities of the United States, or of any State, Territory or Colony thereof, and with any foreign government.

To purchase, take on lease or in exchange, and to hire or otherwise acquire any and all real and personal property or any interest therein or any rights or privileges suitable or convenient for any of the

purposes of its business, insofar as the same may be appurtenant to or useful for the conduct of the business of the corporation, as above specified, but only to the extent to which the corporation may be authorized by the provision of said Section 402 of the Business Corporation Law and the acts amendatory thereof or additional thereto.

To purchase, acquire, hold and dispose of the stocks, bonds and other evidences of indebtedness of any corporation, domestic or foreign; and to acquire, manage and operate all or any part of the business or property of any company engaged in a business similar or incidental to that authorized to be conducted by the company, and as to the consideration thereto, to pay such or exchange property, or issue or deliver shares of stock, bonds or other obligations of the company or of any other corporation.

To purchase, subscribe for or otherwise acquire and to hold share, stock or obligations of any company organized under the laws of the State of New York, or of any other State, or of any Territory or Colony of the United States, or of any foreign country, and to sell, pledge or exchange the same.

To borrow or raise money for the purpose of the company, to secure the same and the interest thereon, and for that or any other purpose to mortgage or change all or any part of the present or after acquired property, rights and franchises of the company, and to issue bonds, notes, debentures or other evidences of the indebtedness.

To guarantee the payments of principal or interest on any notes, debentures, bonds or other obligations of any corporations connected with the general business authorized to be conducted by the company, so far as the same may be permitted by corporations organized under the Business Corporation Law.

To carry out all or any part of the foregoing objects as principal or agents, or in conjunction with any other person, firm, association or company, and in any part of the world, and to do all such other

things as are incidental or conducive to the attainment of the above objects.

THIRD: The office of the corporation is to be located in the City of Yonkers, County of Westchester and State of New York.

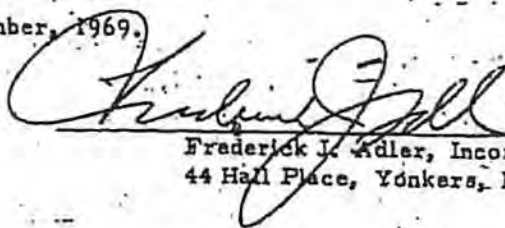
FOURTH: The total number of shares that may be issued by the corporation is TWO HUNDRED (200), all of which are to be of no par value.

FIFTH: The corporation does hereby certify, pursuant to Section 402 (7) of the Business Corporation Law, that the Secretary of State of New York is designated as the agent of the corporation upon whom process against it may be served within the State of New York, and that the Post Office Address to which the Secretary of State shall mail any copy of such process against the corporation which may have been served upon him pursuant to law is c/o Adler & Adler, Esqs., 20 South Broadway, Yonkers, New York.

SIXTH: That the duration of the corporation shall be perpetual.

SEVENTH: That the subscriber is over the age of twenty-one (21) years.

IN WITNESS WHEREOF, the Incorporator has made, subscribed, acknowledged, certified and filed this Certificate of Incorporation this day of December, 1969.



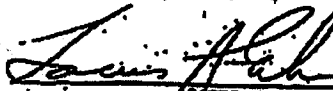
Frederick J. Adler, Incorporator
44 Hall Place, Yonkers, New York

STATE OF NEW YORK

COUNTY OF WESTCHESTER

SS:

On this 11 day of December, 1969 before me personally came FREDERICK J. ADLER, to me known and known to me to be the person described in and who made and subscribed the foregoing Certificate of Incorporation and he acknowledged that he made and subscribed the same.


LOUIS A. ECKER

Notary Public, State of New York
No. 12-11-1233
Appointed in Westchester County
Commission expires March 22, 1970

800189

CERTIFICATE OF INCORPORATION

of

(104)

EMPRESS AMBULANCE SERVICE, INC.

12/8

STATE OF NEW YORK
DEPARTMENT OF STATE
FILED DEC 9 1969
TAX \$ 10
FILING FEE \$ 150

John P. Thompson

Secretary of State

W. B. West

ADLER & ADLER

ATTORNEYS & COUNSELLORS AT LAW
TWENTY SOUTH BROADWAY
YONKERS, NEW YORK 10701

State of New York }
Department of State } ss:

I hereby certify that the annexed copy has been compared with the original document filed by the Department of State and that the same is a true copy of said original.

Witness my hand and seal of the Department of State on

January 11, 2005



A handwritten signature in dark ink, appearing to read "R. A. D. S.", is written over the printed title.

Secretary of State

CERTIFICATE OF INCORPORATION
OF EMPRESS AMBULANCE SERVICE, INC.
UNDER SECTION 405-A OF THE BUSINESS CORPORATION LAW

Pursuant to the provisions of Section 405-A of the Business Corporation Law, the undersigned corporation certifies that it has adopted the following Certificate of Amendment to its Certificate of Incorporation, which changes the corporation's address for service of process.

- (1) The name of the corporation is: Empress Ambulance Service, Inc.
(2) The date the Certificate of Incorporation was filed with the Department of State is December 9, 1959.
(3) The following amendment to Article Fifth of the Certificate of Incorporation effects a change in the address for the Secretary of State to mail any process served upon him as agent for the Corporation.

Article Fifth of the Certificate of Incorporation which currently reads:

"FIFTH: The corporation does hereby certify, pursuant to Section 402 (7) of the Business Corporation Law, that the Secretary of State of New York is designated as the agent of the corporation upon whom process against it may be served within the State of New York, and that the Post Office Address to which the Secretary of State shall mail any copy of such process against the corporation which may have been served upon him pursuant to law is of Adler & Adler, Inc., 20 South Broadway, Yonkers, New York."

is hereby amended to read:

"FIFTH: The Secretary of State is designated as agent of the corporation upon whom process against it may be served. The post office address to which the Secretary of State shall mail a copy of any process against the corporation served upon him is: Empress Ambulance Service, Inc., 241-243 South Broadway Yonkers, N. Y. 10701"

- (4) The holders of all outstanding shares entitled to vote on said amendment have unanimously voted to adopt said amendment.

IN WITNESS WHEREOF, this Certificate has been subscribed this 16th day of APRIL, 1961, by the undersigned who attests that the statements made herein are true and correct to the best of his knowledge.

EMPRESS AMBULANCE SERVICE, INC.

Wesley C. Hyatt
Wesley C. Hyatt, President

2

STATE OF NEW YORK
DEPARTMENT OF STATE

FILED APR 26 1985

AMT. OF CHECK 20
FILING FEE 20
TAX 0
COUNTY FEE 0
COPY 0
CERT 0
RECORD 0
SPED HANDLE 0

[Handwritten signature]

8218559

EXPRESS ASSISTANCE SERVICE

CERTIFICATE OF CHANGE TO
CERTIFICATE OF INCORPORATION
PURSUANT TO SECT. 802 OF
THE BUSINESS CORPORATION LAW

12/9/69

WEST CO

800169-22

APA

3520300

FILED BY WILLIAM H. GRAYSON, Esq.
240 North State St.
Albany, New York 12242

Att

Adler

20-50

State of New York)
Department of State) ss:

I hereby certify that this annexed copy has been compared with the original document filed by the Department of State and that the same is a true copy of said original.

Witness my hand and seal of the Department of State on

January 11, 2005



A handwritten signature in dark ink, appearing to be "R. A. D. S.", written over a horizontal line.

Secretary of State

**State of New York
Department of State } ss:**

I hereby certify, that the Certificate of Incorporation of EMPRESS AMBULANCE SERVICE, INC. was filed on 12/09/1969, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is an existing corporation.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 26th day of August
two thousand and eight.*

A handwritten signature in dark ink, appearing to read "Daniel Shapiro".

Daniel Shapiro
Special Deputy Secretary of State

STATE OF NEW YORK

DEPARTMENT OF STATE

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the
Department of State, at the City of Albany, on
December 1, 2016.

A handwritten signature in black ink, appearing to read "Brendan Fitzgerald", written over a horizontal line.

Brendan Fitzgerald
Executive Deputy Secretary of State

SERVICO-35

201611300

41

CERTIFICATE OF ASSUMED NAME
Pursuant to Section 130 of the General Business Law

- 1) The name of the entity is: **EMPRESS AMBULANCE SERVICE, INC.**
- 2) Business is formed under: **Business Corporation Law**
- 3) Assumed Name: **MONTEFIORE**
- 4) Principal place of business in New York State:

722 Nepperhan Ave.
Yonkers, New York 10703
County: Westchester

____ (If none, check and insert out of state address above.)

- 5) Counties in which business will be conducted under the assumed name.
(☐ All Counties)
 Westchester
 Rockland, Bronx

- 6) Addresses and County of each business location within New York State:
(or ☐ No New York State Business Location)

722 Nepperhan Ave.
Yonkers, New York 10703
Westchester

s/Michael Minerva
BY: Michael Minerva, Authorized Person

41

SERVICO-35

CERTIFICATE OF ASSUMED NAME
OF

EMPRESS AMBULANCE SERVICE, INC.

Pursuant to Section 130 of the General Business Law

FILED
2016 NOV 30 PM 12:32

1CC
STATE OF NEW YORK
DEPARTMENT OF STATE
FILED NOV 30 2016
JMS 388141
BY: KT

Acct: 31496

CUSTOMER REFERENCE NUMBER: 64683

FILER:
Taddeo & Shahan, LLP
472 S. Salina Street, Suite 700 (COMMERCIAL)
Syracuse, NY 13202

DEPARTMENT OF STATE

I hereby certify that the annexed copy has been compared with the original document in the custody of the Secretary of State and that the same is a true copy of said original.



WITNESS my hand and official seal of the
Department of State, at the City of Albany,
on May 26, 2015.

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State

201 505 220 69

SERVICO-35

CERTIFICATE OF ASSUMED NAME
Pursuant to Section 130 of the General Business Law

- 1) The name of the entity is: **EMPRESS AMBULANCE SERVICE, INC.**
- 2) Business is formed under: **Business Corporation Law**
- 3) Assumed Name: **EMERGACARE NEW YORK EMERGENCY AMBULANCE SERVICES**
- 4) Principal place of business in New York State:

**722 Nepperhan Ave.
Yonkers, NY 10703
County: Westchester**

____ (If none, check and insert out of state address above.)

- 5) Counties in which business will be conducted under the assumed name.
(☐ All Counties)
 Westchester
 Rockland

- 6) Addresses and County of each business location within New York State:
(or ☐ No New York State Business Location)

**722 Nepperhan Ave.
Yonkers, NY 10703
Westchester**

s/Michael Minerva
BY: Michael Minerva, Authorized Person

SERVICO-35

69

**CERTIFICATE OF ASSUMED NAME
OF**

EMPRESS AMBULANCE SERVICE, INC.

Pursuant to Section 130 of the General Business Law

FILED
RECEIVED
MAY 22 PM 12:07
MAY 22 PM 3:02

Account 1496

CUSTOMER REFERENCE NUMBER: 58306

FILER:
Taddeo & Shahan, LLP
472 S. Salina Street, Suite 700
Syracuse, NY 13202

16
**STATE OF NEW YORK
DEPARTMENT OF STATE**

FILED MAY 22 2015

TAXES 390561
FEES 71

800169-5

**Paramedics Logistics
Holding Company, LLC
Certificate of Formation**

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PARAMEDICS LOGISTICS HOLDING COMPANY, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE EIGHTE DAY OF APRIL, A.D. 2019.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PARAMEDICS LOGISTICS HOLDING COMPANY, LLC" WAS FORMED ON THE SEVENTEENTH DAY OF JANUARY, A.D. 2018.

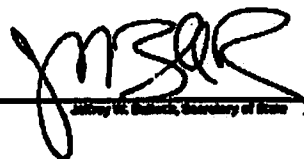
AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.



6714062 8300

SR# 20192627302

You may verify this certificate online at corp.delaware.gov/authver.shtml


Jeffrey W. Bullock, Secretary of State

Authentication: 202595224

Date: 04-08-19

Delaware

The First State

Page 1

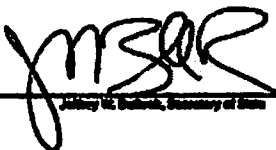
I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED ARE TRUE AND CORRECT COPIES OF ALL DOCUMENTS ON FILE OF "PARAMEDICS LOGISTICS HOLDING COMPANY, LLC" AS RECEIVED AND FILED IN THIS OFFICE.

THE FOLLOWING DOCUMENTS HAVE BEEN CERTIFIED:

CERTIFICATE OF FORMATION, FILED THE SEVENTEENTH DAY OF JANUARY, A.D. 2018, AT 6:54 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID CERTIFICATES ARE THE ONLY CERTIFICATES ON RECORD OF THE AFORESAID LIMITED LIABILITY COMPANY, "PARAMEDICS LOGISTICS HOLDING COMPANY, LLC".




Jeffrey W. Bullock, Secretary of State

6714062 8100H
SR# 20192636481

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202597627
Date: 04-08-19

**CERTIFICATE OF FORMATION
OF**

State of Delaware
Secretary of State
Division of Corporations
Delivered 06:54 PM 01/17/2018
FILED 06:54 PM 01/17/2018
SR 19100316373 - FileNumber 6714062

PARAMEDICS LOGISTICS HOLDING COMPANY, LLC

This Certificate of Formation of Paramedics Logistics Holding Company, LLC (the "Limited Liability Company"), dated January 17, 2018, is being duly executed and filed by Matthew Edwards, as an authorized person to form a limited liability company under the Delaware Limited Liability Company Act (6 Del. C. § 18-101 et seq.).

The undersigned, being duly authorized to execute and file this Certificate of Formation, hereby certifies that:

FIRST: The name of the Limited Liability Company is Paramedics Logistics Holding Company, LLC.

SECOND: The address of the registered office and the name and the address of the registered agent of the limited liability company required to be maintained by Section 18-104 of the Delaware Limited Liability Company Act are Corporation Service Company, 251 Little Falls Drive, Wilmington, Delaware 19808, County of New Castle.

IN WITNESS WHEREOF, the undersigned has duly executed this Certificate of Formation as of the day and year first written above.

/s/ Matthew Edwards
Matthew Edwards,
Authorized Person

**Proposed Budget for NYS
Operations of all Emergacare
and Empress Entities at the
Subject of the Transfer of
Ownership Application**

**Proposed Budget for NYS Operations of all Emergacare and Empress entities
at the subject of the transfer of ownership application**

<i>(\$ in 000s)</i>	2026 Budget
Total Revenue	\$133,531
Wages & Benefits	86,433
Fleet and Equipment Expenses	5,132
Other Costs	28,085
Total Expenses	\$119,649
Divisional Contribution⁽¹⁾	\$13,881

(1) Excludes any Depreciation, Amortization, Interest or Tax Expense allocated to these entities; Excludes any costs associated with corporate support (i.e. Finance, C-Suite, etc.)

Note: The budget information provided is for informational and preliminary planning purposes, only. All figures, estimates, and projections are subject to change and may vary based upon updated data, completion of all due diligence in contemplation of sale, changing circumstances, or management decisions. The final budget may differ materially from the projections presented here, which are submitted for purposes of compliance with information requested in connection with DOH Form 3777.

Maps of Primary Operating Territory

Agency Code Number: 0670

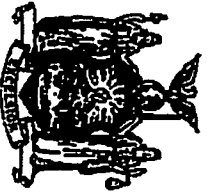
Issued: 7/7/2025

Expires: 7/31/2027

NEW YORK STATE DEPARTMENT OF HEALTH
Ambulance Service Certificate

Emergacare NY, LLC

DBA: Empress Emergency Ambulance Services



is hereby certified as a New York State ambulance service in

accordance with the provisions of Article 30 of the

Public Health Law



PRIMARY TERRITORY:

Counties of Westchester, Bronx, and New York


Emergency Medical Services Program

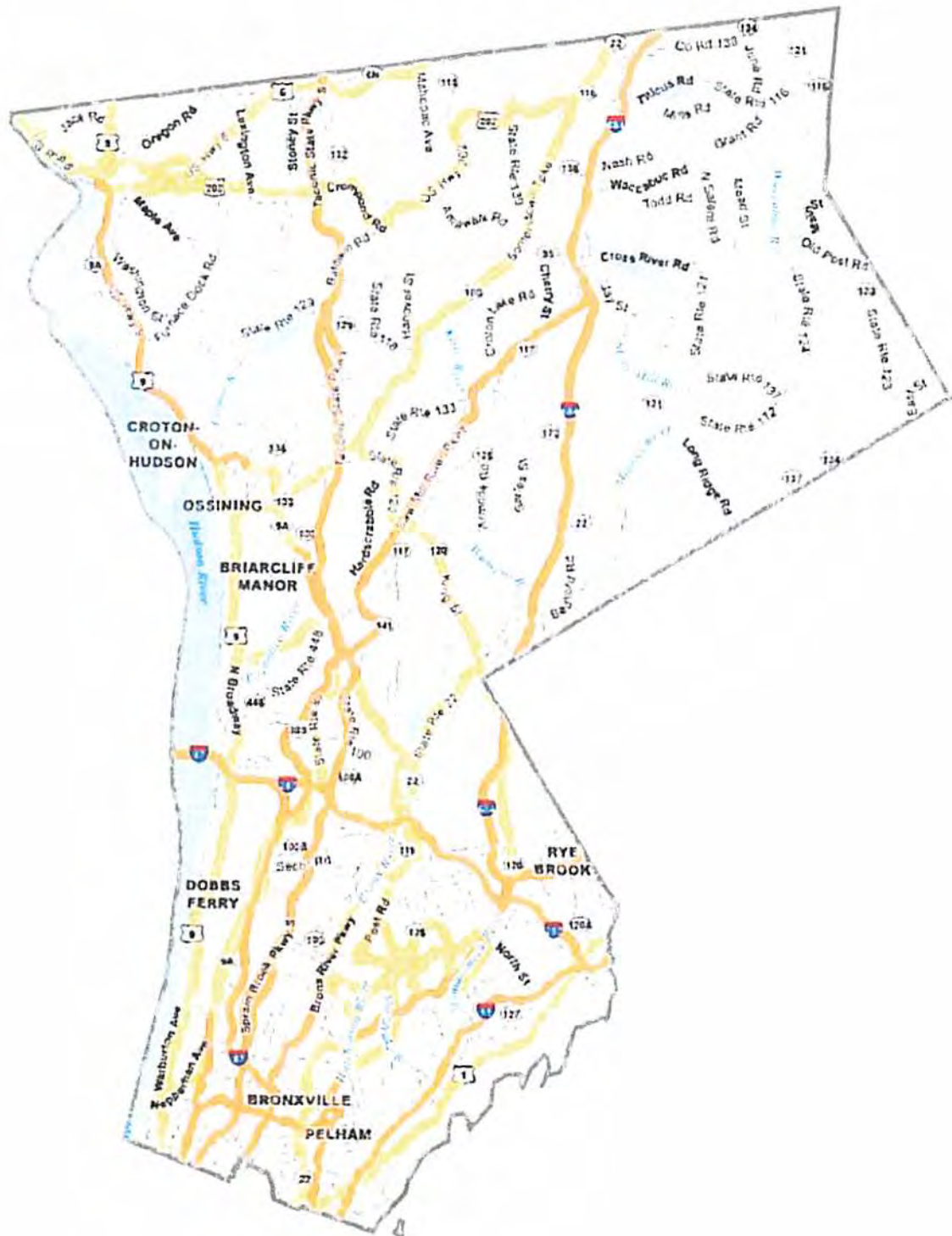

Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE

Keep conspicuously posted

Westchester County Map, New York



Bronx County Map, New York



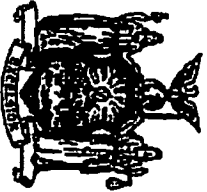
Agency Code Number: 5930

Issued: 7/21/2025

Expires: 7/31/2027

NEW YORK STATE DEPARTMENT OF HEALTH

Ambulance Service Certificate



Empress Ambulance Service, LLC

DBA: Emergacare NY, EMPRESS Ambulance Services, Montefiore,

DBA: EMStar Ambulance, Moblemedic EMS, Mobile Life, Empress EMS

is hereby certified as a New York State ambulance service in

accordance with the provisions of Article 30 of the

Public Health Law



PRIMARY TERRITORY:

Counties of Westchester, Rockland, Putnam, Dutchess, Orange, Ulster, Sullivan; City of Yonkers; Bronx County
Community Boards of BX05, BX06, BX07, BX08, BX10, BX11, BX12

[Signature]

Emergency Medical Services Program

[Signature]

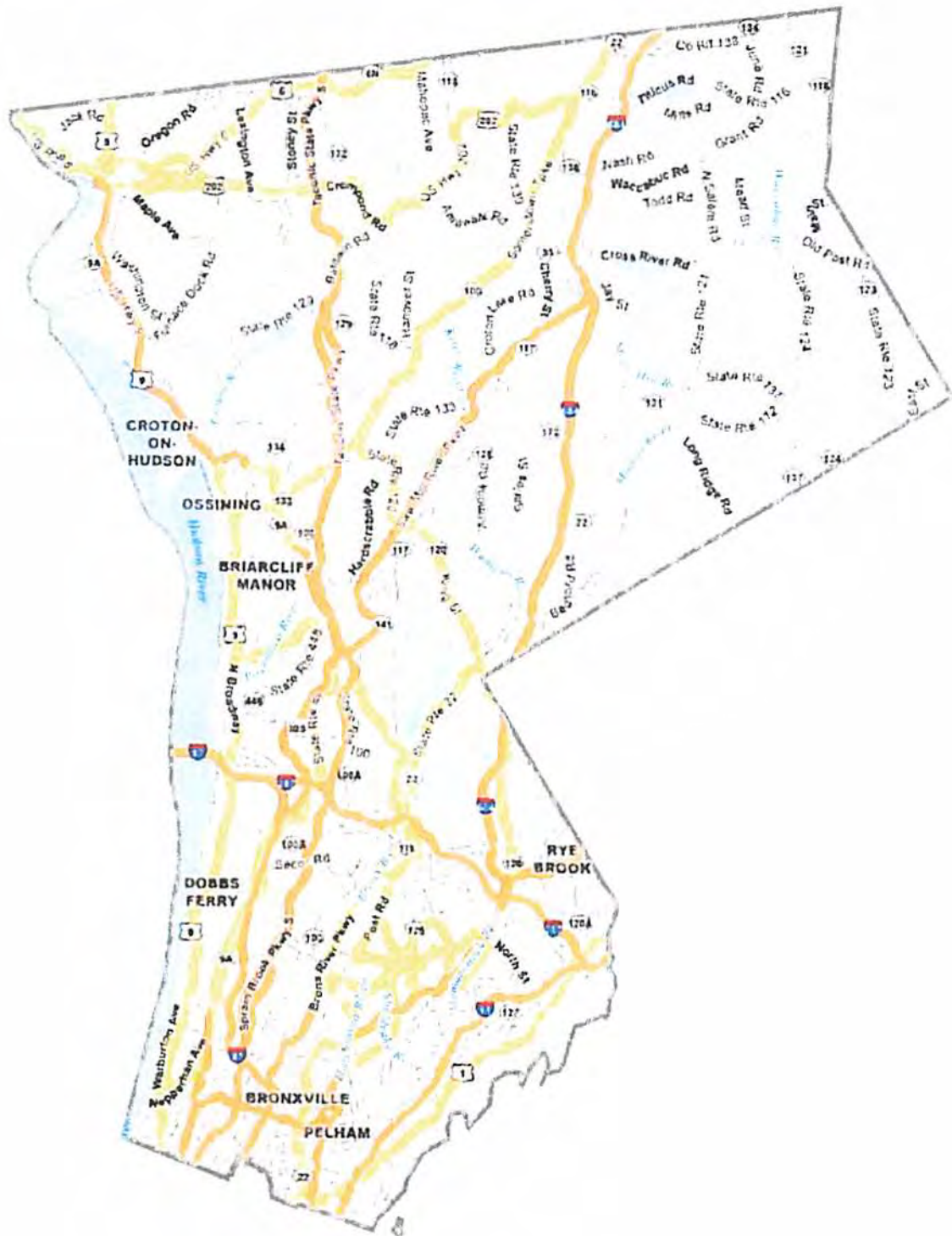
Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE

Keep conspicuously posted

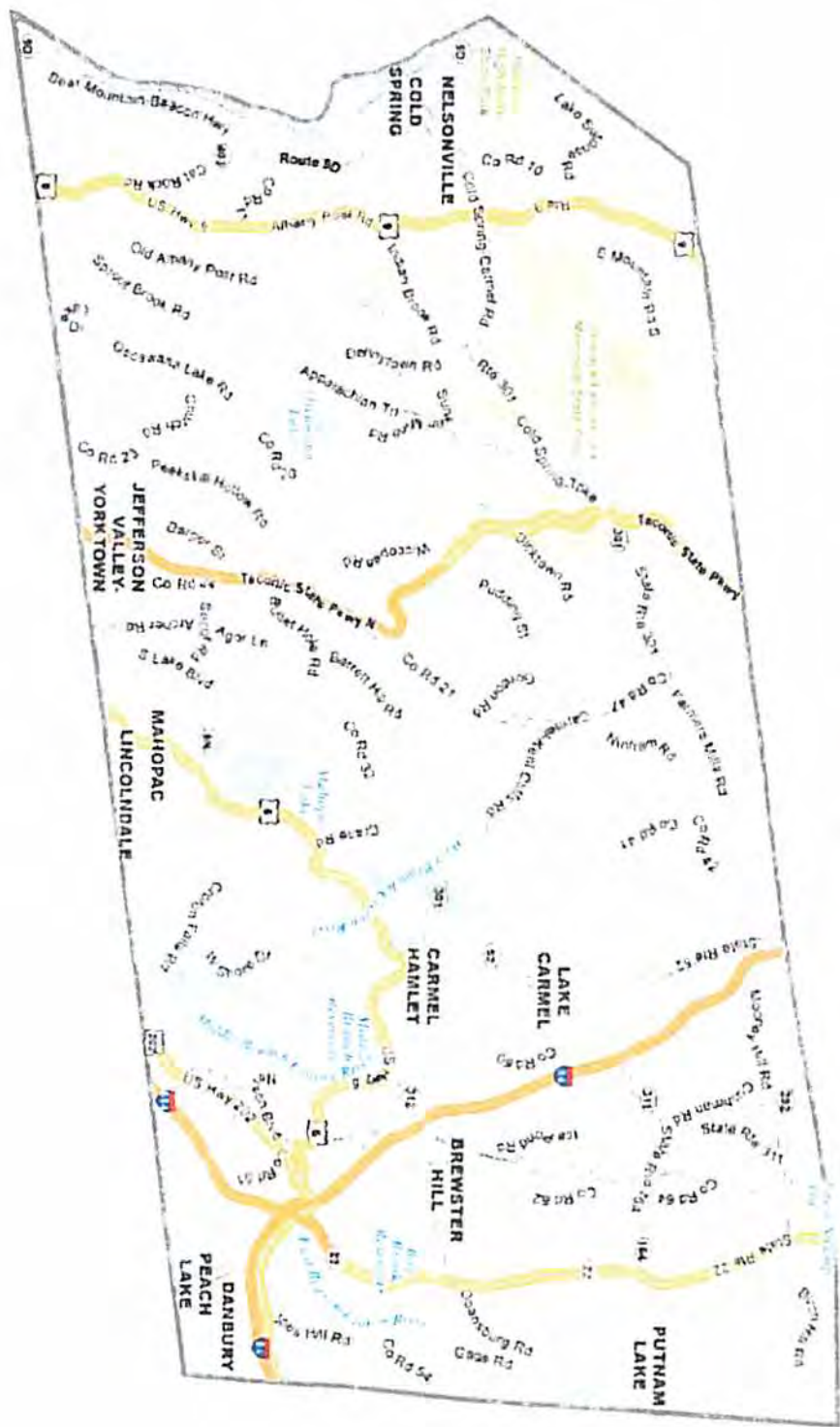
Westchester County Map, New York



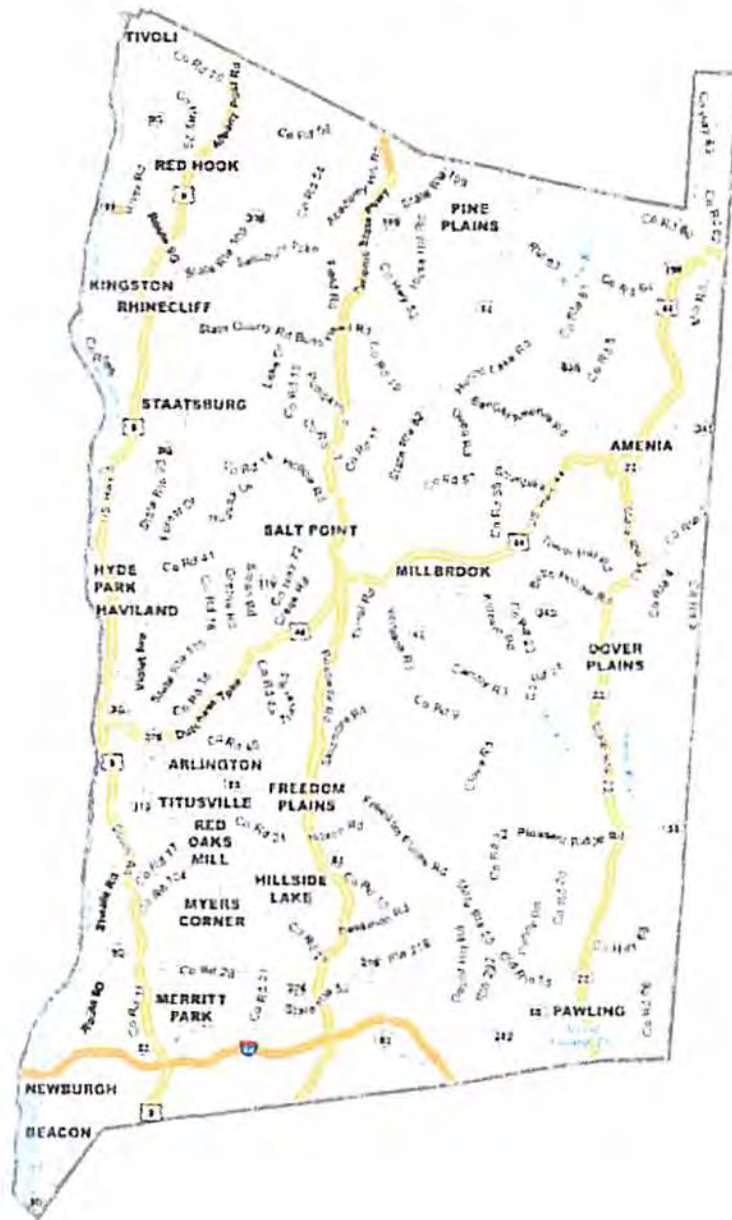
Rockland County Map, New York



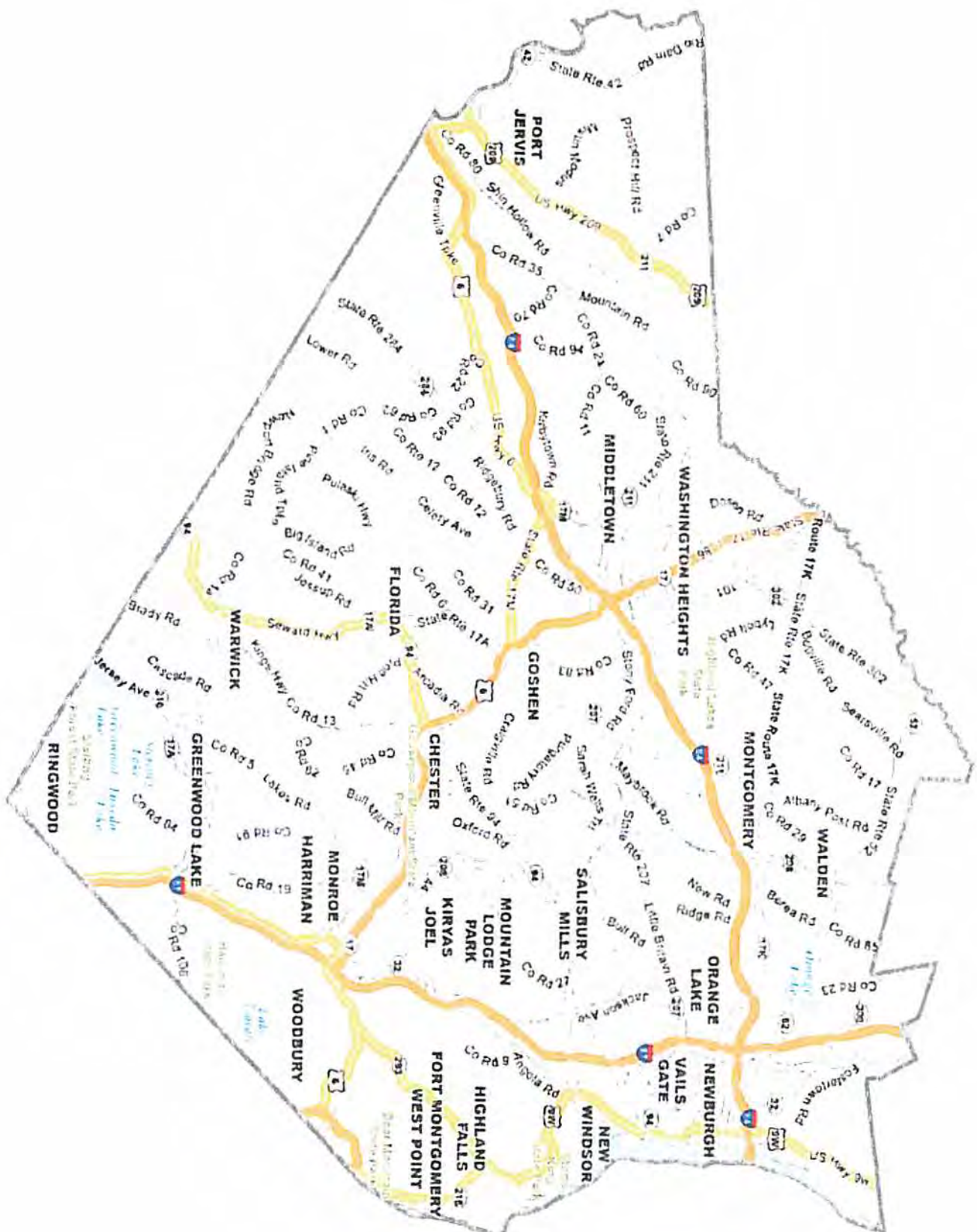
Putnam County Map, New York



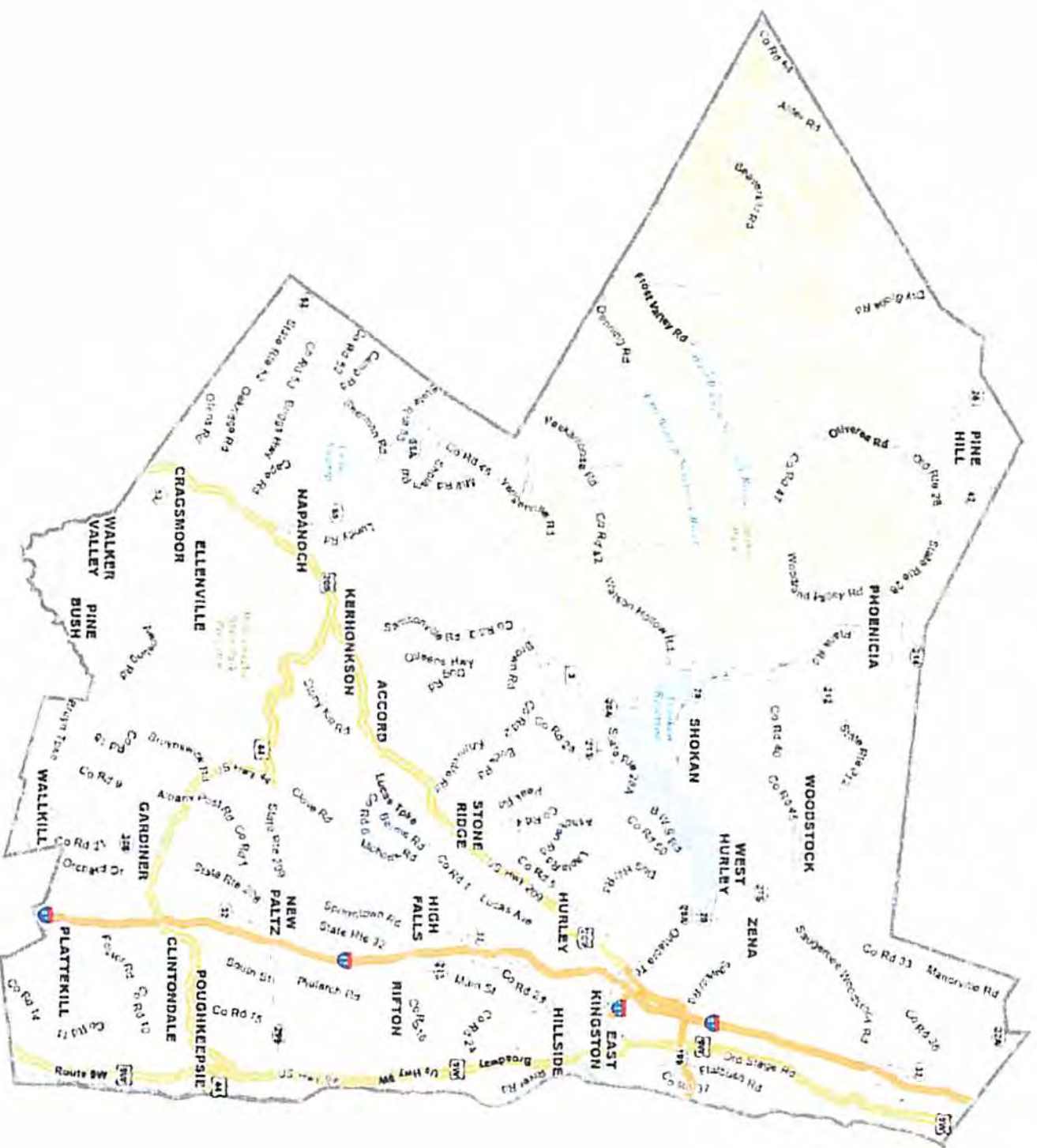
Dutchess County Map, New York



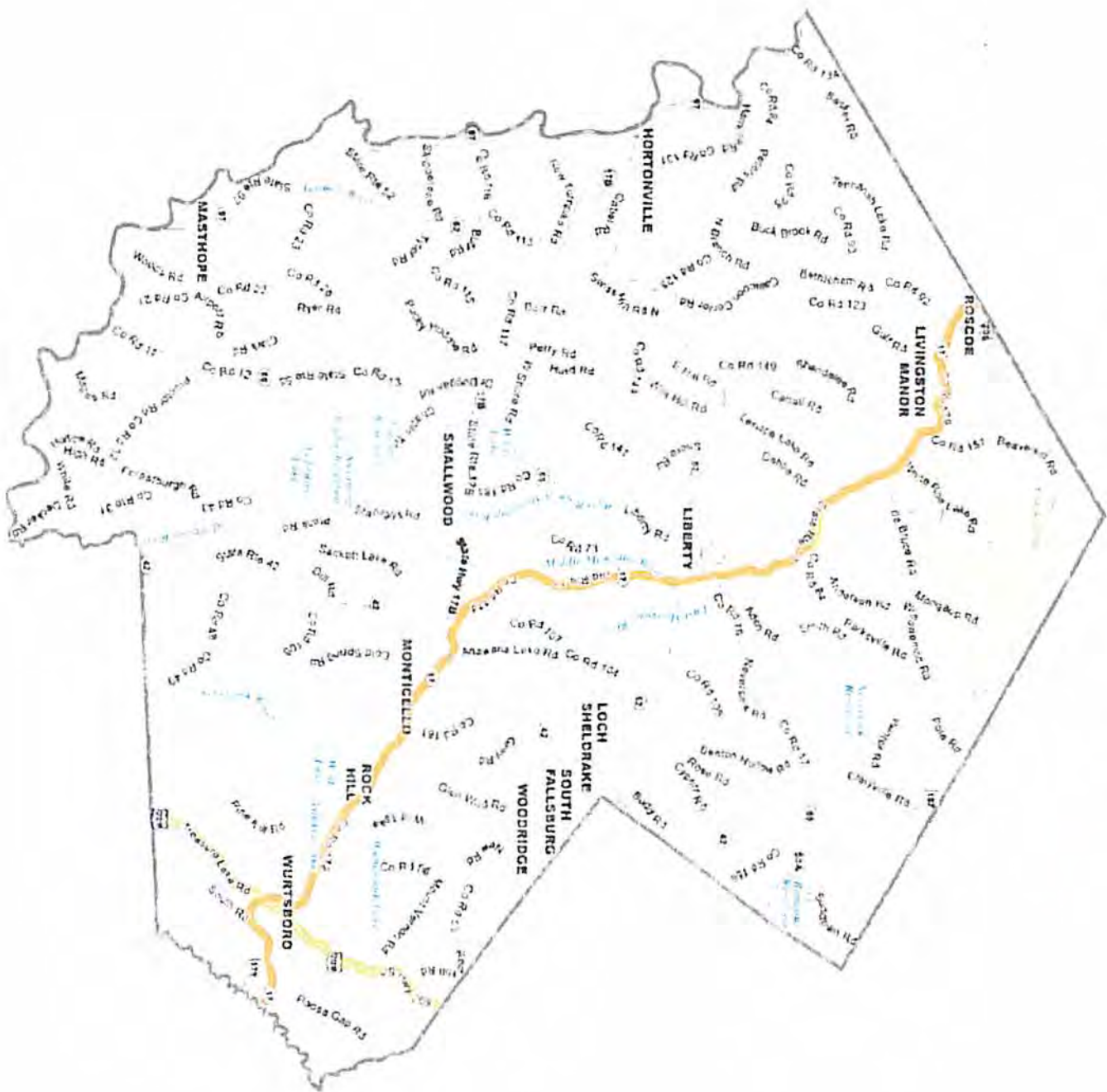
Orange County Map, New York



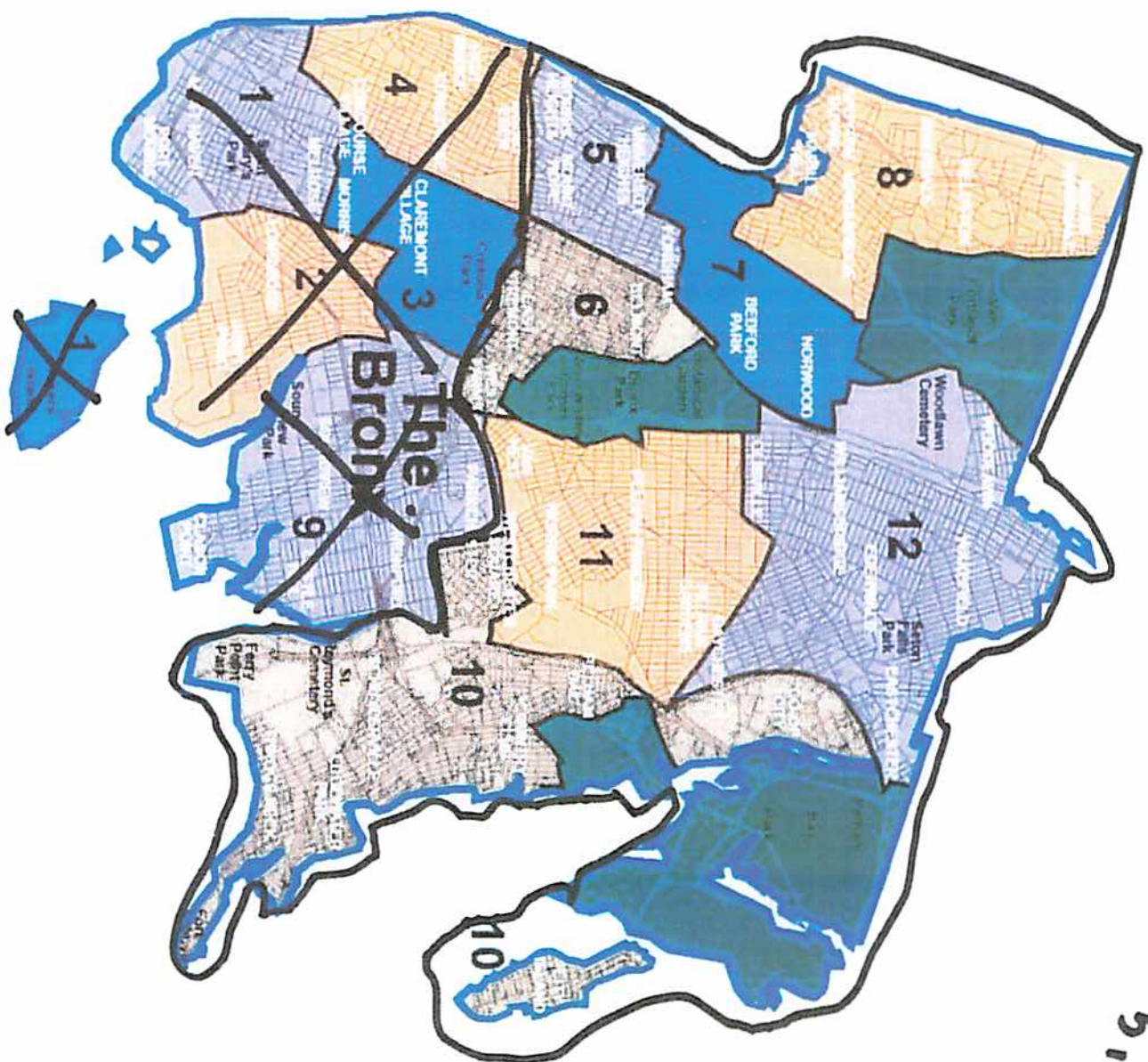
Ulster County Map, New York



Sullivan County Map, New York



Bronx Community Boards



5, 6, 7, 8, 10,
11 & 12

Exhibit B

List of Deficiencies and Malpractices

List of Deficiency Notices Issued Within the Past 10 Years

There are no deficiency notices issued with the past 10 years against Brave GAC Holdings, LP, William J. Gumina, Benjamin Oxnard, Eric Kim, Jeffrey Shullaw, or Herman Schwarz.

Mr. Shullaw identified one Order on Agreed Settlement issued in Nebraska applicable to Midwest Medical Transport Co. while Mr. Shullaw was CEO of MMT. A copy of that Statement is attached as **Exhibit 1**. With respect to Exhibit 1, the administrative petition involved a lapse in certification for two persons employed by MMT. MMT voluntarily reported this lapse upon discovery as required by Nebraska law. No patients were harmed in connection with this lapse. It was resolved to the full satisfaction of the authority having jurisdiction in Nebraska pursuant to the Order on Agreed Settlement attached as Exhibit 1.

With respect to Mr. Schwarz, Empress Ambulance Service, LLC was cited by the New York State Department of Health on or about January 13, 2025, for violations of 10 NYCRR § 800.21(a),(b),(n), 800.22(h), 800.23(a),(f), 800.24(b)(4) and (b)(6). A civil penalty of \$20,000 was assessed by the Department of Health, and the matter was closed.

List of Malpractice Actions Issued Within the Past 10 Years

There are no malpractice actions issued with the past 10 years against against Brave GAC Holdings, LP, William J. Gumina, Benjamin Oxnard, Eric Kim, Jeffrey Shullaw, or Herman Schwarz.

Exhibit 1
Order on Agreed Settlement

FILED

SEP 29 2021

STATE OF NEBRASKA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

STATE OF NEBRASKA ex rel. DOUGLAS
J. PETERSON, Attorney General,

Plaintiff,

vs.

MIDWEST MEDICAL TRANSPORT CO,

Defendant.

DHHS Hearing Office

210951 EMS

ORDER ON
AGREED SETTLEMENT

A proposed Agreed Settlement was filed with the Department on September 23, 2021.

ORDER

1. The Agreed Settlement is adopted, attached hereto and incorporated by reference.
2. The facts as set out in the Petition are taken as true and adopted herein.
3. The parties shall comply with all of the terms of the Agreed Settlement.

Date: 9-29-21

Gary J. Anthon, MD
Chief Medical Officer
Director, Division of Public Health
Department of Health and Human Services

Civil penalty, if imposed, should be mailed to: DHHS, Division of Public Health, Licensure Unit, ATTN: Diane Pearson, P.O. Box 94986, Lincoln, NE 68509.

CERTIFICATE OF SERVICE

The undersigned certifies that a copy of the foregoing was sent on the date below by certified United States Mail, postage prepaid, return receipt requested, and/or electronically to the following:

JOSEPH HUIGENS ATTORNEY AT LAW 1125 S 103RD ST STE 800 OMAHA NE 68124
LISA ANDERSON ASSISTANT ATTORNEY GENERAL AGO.HEALTH@NEBRASKA.GOV

Date: 9/29/21

7019 2970 0001 3495 6762

DHHS Hearing Office
P.O. Box 98914
Lincoln, NE 68509-8914
P. (402) 471-7237 F. (402) 742-2376
dhhs.hearingoffice@nebraska.gov

**STATE OF NEBRASKA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH**

**STATE OF NEBRASKA ex rel. DOUGLAS
J. PETERSON, Attorney General,**

Plaintiff,

vs.

**MIDWEST MEDICAL TRANSPORT CO.,
E.M.S.,**

Defendant.

AGREED SETTLEMENT

The Plaintiff and the Defendant, Midwest Medical Transport Co., E.M.S., in consideration of the mutual covenants and agreements contained herein, agree as follows:

1. The Defendant, Midwest Medical Transport Co., was issued an emergency medical service license (#5158) by the Nebraska Department of Health and Human Services Division of Public Health ("Department").
2. The Defendant acknowledges receipt of a copy of the Petition for Disciplinary ("Petition") and waives the need for further service of the Petition upon it.
3. Before disciplinary measures may be taken against the Defendant's Nebraska emergency medical service license, the Defendant is entitled to a hearing as provided by law. The Defendant waives the right to a hearing. The Defendant also waives any right to judicial review of a disciplinary order which approves the terms of this Agreed Settlement.
4. No coercion, threats, or promises, other than those stated herein, were made to the Defendant to induce it to enter into this Agreed Settlement.

5. The Defendant acknowledges that it has read the Petition filed by the Attorney General's Office and neither admits nor denies the allegations contained therein.

6. The Plaintiff and the Defendant consent to the Department's Chief Medical Officer entering a final disciplinary order which finds that the allegations of the Petition are true, censures the Defendant's Nebraska emergency medical service license and imposes a Five Thousand Dollar (\$5,000) civil penalty. The civil penalty shall be payable in full within twelve (12) months from the date the Chief Medical Officer enters a disciplinary order in accordance with this Agreed Settlement. In the event the Defendant fails to pay the civil penalty in full by the stated deadline, the Chief Medical Officer may summarily suspend the Defendant's Nebraska emergency medical service license, which suspension shall remain in effect until the civil penalty is paid in full.

7. If this Agreed Settlement is not approved by the Chief Medical Officer, this Agreed Settlement shall become null and void and will not be admissible for any purpose at any hearing that may be held on this matter.

**(REMAINDER OF PAGE INTENTIONALLY LEFT BLANK; SIGNATURE PAGE
FOLLOWS)**

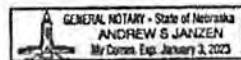
AGREED TO:

BY:

[REDACTED]
Jeff Shullaw, Owner,
Midwest Medical Transport Co.,
E.M.S.,
Defendant

State of Nebraska)
County of Douglas)

This Agreed Settlement is acknowledged before me by Jeff Shullaw on this
30th day of August, 2021.



[REDACTED]
Notary Public
My Commission Expires: 01-03-2023

STATE OF NEBRASKA, ex rel.
DOUGLAS J. PETERSON, Attorney
General,
Plaintiff,

BY: DOUGLAS J. PETERSON,
#18146
Attorney General

By:

[REDACTED]
Lisa K. Anderson, #21845
Assistant Attorney General
2115 State Capitol
Lincoln, NE 68509-8920
(402) 471-4593

Attorneys for the Plaintiff.

FILED

SEP 23 2021

**STATE OF NEBRASKA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH**

STATE OF NEBRASKA ex rel. DOUGLAS J. PETERSON, Attorney General,
Plaintiff,
v.
MIDWEST MEDICAL TRANSPORT CO., E.M.S.,
Defendant.

PETITION FOR DISCIPLINARY ACTION

The Plaintiff alleges as follows:

ALLEGATIONS COMMON TO ALL CAUSES OF ACTION:

1. Jurisdiction is based on Neb. Rev. Stat. Neb. Rev. Stat. §§ 38-176 and 38-186 (Reissue 2016, Cum. Supp. 2020).
2. At all times relevant herein, the Defendant, Midwest Medical Transport Co., E.M.S., has been the holder of a license (#5156) issued by the Nebraska Department of Health and Human Services Division of Public Health ("Department") to practice as an advanced life support emergency medical service.
3. The Department is the agency in the State of Nebraska authorized to enforce the provisions of the Uniform Credentialing Act regulating the practice of emergency medical services.
4. The Nebraska Board of Emergency Medical Services considered the investigation of this matter and made a disciplinary recommendation to the Attorney General, which recommendation has been considered. Such matters are privileged pursuant to Neb. Rev. Stat. §§ 38-1,105 and 38-1,106 (Reissue 2016).

5. On December 1, 2015, the Defendant entered into an Assurance of Compliance with the Attorney General's Office for allegedly allowing an individual with an expired license to provide patient care. The Assurance of Compliance required the Defendant to "...only utilize licensed out-of-hospital emergency care providers and individuals as identified in 172 NAC 12-004.06C to provide patient care."

6. The Defendant employed C.B. as an emergency medical technician. Between January 3, 2018, and October 4, 2018, C.B. provided patient care on 119 emergency service calls answered by the Defendant. These runs occurred when C.B.'s emergency medical technician license was expired.

7. The Defendant employed K.R. as an emergency medical technician. Between January 3, 2018, and October 14, 2018, K.R. provided patient care on 30 emergency service calls answered by the Defendant. These runs occurred when K.R.'s emergency medical technician license was expired.

8. The Defendant reported the terminations of C.B. and K.R. for practicing after their EMT licenses expired to the Department as required by law.

FIRST CAUSE OF ACTION

9. Paragraphs 1 through 8 are incorporated herein by reference.

10. Neb. Rev. Stat. § 38-178(10) (Cum. Supp. 2020) provides that licensed health professional may be disciplined for "permitting, aiding, or abetting the practice of a profession of the performance of activities requiring a credential by a person not credentialed to do so.

11. Title 172 Neb. Admin. Code., Ch. 12, §004.06D of the Licensure of Emergency Medical Services Regulations provides that only licensed out-of-hospital

emergency care providers and individuals identified in 172 NAC 12-004.06C must be used to provide patient care.

12. Neb. Rev. Stat. § 38-142(2) (Reissue 2016) provides that when a health professional's license expires, the health professional's right to represent himself/herself as a licensed individual and to practice the profession shall terminate.

13. The Defendant's act of allowing K.B. and K.R. to provide patient care after their emergency medical technician licenses had expired is grounds for discipline.

SECOND CAUSE OF ACTION

14. Paragraphs 1 through 13 are incorporated herein by reference.

15. Neb. Rev. Stat. § 38-178(22) (Cum. Supp. 2020) provides that a health professional license may be disciplined for violating an Assurance of Compliance entered into under section 38-1,108.

16. The Defendant's act of allowing K.B. and K.R. to provide patient care after their emergency medical technician licenses had expired constitutes a violation of the Assurance of Compliance set out above in paragraph 5 which is grounds for discipline.

PRAYER FOR RELIEF

WHEREFORE, the Plaintiff prays that the Chief Medical Officer set this matter for hearing, order appropriate disciplinary action pursuant to Neb. Rev. Stat. § 38-186 (Reissue 2016) and tax the costs of this action to the Defendant.

STATE OF NEBRASKA ex rel. DOUGLAS J.
PETERSON, Attorney General,
Plaintiff,

BY: DOUGLAS J. PETERSON, #18148
Attorney General

BY: 
Lisa K. Anderson, #21845
Assistant Attorney General
2115 State Capitol
Lincoln, NE 68509
(402) 471-4593

Attorneys for Plaintiff.



STATE OF NEBRASKA
Office of the Attorney General
2115 STATE CAPITOL BUILDING
LINCOLN, NE 68509-5820
(402) 471-2882
TDD (402) 471-2682
FAX (402) 471-3287 or (402) 471-4725

LICENSURE UNIT
DEC 11 2015
RECEIVED

DOUGLAS J. PETERSON
ATTORNEY GENERAL

EDWARD VIERK
ASSISTANT ATTORNEY GENERAL

December 10, 2015

VIA INTERAGENCY MAIL

Becky Wisell
Licensure Unit Administrator
DHHS Division of Public Health
301 Centennial Mall North, 3rd Floor
Lincoln, NE 68509

**RE: *In the Matter of the License of Midwest Medical Transport Co., E.M.S.
Assurance of Compliance***

Dear Ms. Wisell:

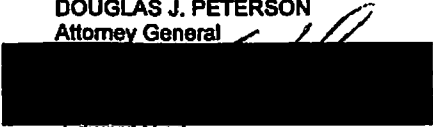
Enclosed are the following documents:

1. original, fully executed Assurance of Compliance; and
2. copy of the transmittal letter to Jeff Shullaw, Manager, Midwest Medical Transport Co., December 10, 2015.

The above-referenced documents may be filed with the public record of Midwest Medical Transport Co.'s license to practice Emergency Medical Services.

Sincerely,

DOUGLAS J. PETERSON
Attorney General


Edward Vierk
Assistant Attorney General

Enclosures
34-1788-6

FILED

SEP 29 2021

STATE OF NEBRASKA
DEPARTMENT OF HEALTH AND HUMAN SERVICES

STATE OF NEBRASKA ex rel. DOUGLAS
J. PETERSON, Attorney General,

Plaintiff,

vs.

MIDWEST MEDICAL TRANSPORT CO.,

Defendant.

DHHS Hearing Office

210951 EMS

ORDER ON
AGREED SETTLEMENT

A proposed Agreed Settlement was filed with the Department on September 23, 2021.

ORDER

1. The Agreed Settlement is adopted, attached hereto and incorporated by reference.
2. The facts as set out in the Petition are taken as true and adopted herein.
3. The parties shall comply with all of the terms of the Agreed Settlement.

Date: 9-29-21

Gary J. Anthony, MD
Chief Medical Officer
Director, Division of Public Health
Department of Health and Human Services

Civil penalty, if imposed, should be mailed to: DHHS, Division of Public Health, Licensure Unit, ATTN: Diane Pearson, P.O. Box 94986, Lincoln, NE 68509.

CERTIFICATE OF SERVICE

The undersigned certifies that a copy of the foregoing was sent on the date below by certified United States Mail, postage prepaid, return receipt requested, and/or electronically to the following:

JOSEPH HUIGENS
ATTORNEY AT LAW
1125 S 103RD ST STE 800
OMAHA NE 68124
LISA ANDERSON
ASSISTANT ATTORNEY GENERAL
AGO.HEALTH@NEBRASKA.GOV

Date: 9/29/21

7019 2970 0001 3495 6762

DHHS Hearing Office
P.O. Box 98914
Lincoln, NE 68509-8914
P. (402) 471-7237 F. (402) 742-2378
dhhs.hearingoffice@nebraska.gov

**STATE OF NEBRASKA
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH**

**STATE OF NEBRASKA ex rel. DOUGLAS
J. PETERSON, Attorney General,**

Plaintiff,

vs.

**MIDWEST MEDICAL TRANSPORT CO.,
E.M.S.,**

Defendant.

AGREED SETTLEMENT

The Plaintiff and the Defendant, Midwest Medical Transport Co., E.M.S., in consideration of the mutual covenants and agreements contained herein, agree as follows:

1. The Defendant, Midwest Medical Transport Co., was issued an emergency medical service license (#5158) by the Nebraska Department of Health and Human Services Division of Public Health ("Department").
2. The Defendant acknowledges receipt of a copy of the Petition for Disciplinary ("Petition") and waives the need for further service of the Petition upon it.
3. Before disciplinary measures may be taken against the Defendant's Nebraska emergency medical service license, the Defendant is entitled to a hearing as provided by law. The Defendant waives the right to a hearing. The Defendant also waives any right to judicial review of a disciplinary order which approves the terms of this Agreed Settlement.
4. No coercion, threats, or promises, other than those stated herein, were made to the Defendant to induce it to enter into this Agreed Settlement.

5. The Defendant acknowledges that it has read the Petition filed by the Attorney General's Office and neither admits nor denies the allegations contained therein.

6. The Plaintiff and the Defendant consent to the Department's Chief Medical Officer entering a final disciplinary order which finds that the allegations of the Petition are true, censures the Defendant's Nebraska emergency medical service license and imposes a Five Thousand Dollar (\$5,000) civil penalty. The civil penalty shall be payable in full within twelve (12) months from the date the Chief Medical Officer enters a disciplinary order in accordance with this Agreed Settlement. In the event the Defendant fails to pay the civil penalty in full by the stated deadline, the Chief Medical Officer may summarily suspend the Defendant's Nebraska emergency medical service license, which suspension shall remain in effect until the civil penalty is paid in full.

7. If this Agreed Settlement is not approved by the Chief Medical Officer, this Agreed Settlement shall become null and void and will not be admissible for any purpose at any hearing that may be held on this matter.

**(REMAINDER OF PAGE INTENTIONALLY LEFT BLANK; SIGNATURE PAGE
FOLLOWS)**

AGREED TO:

BY:

[REDACTED]
Jeff Shullaw, Owner,
Midwest Medical Transport Co.,
E.M.S.,
Defendant

State of Nebraska)

County of Douglas)

This Agreed Settlement is acknowledged before me by Jeff Shullaw on this
30th day of August, 2021.



[REDACTED]
Notary Public
My Commission Expires: 01-03-2023

STATE OF NEBRASKA, ex rel.
DOUGLAS J. PETERSON, Attorney
General,
Plaintiff,

BY: DOUGLAS J. PETERSON,
#18148
Attorney General

By:

[REDACTED]
Lisa K. Anderson, #21845
Assistant Attorney General
2115 State Capitol
Lincoln, NE 68509-8920
(402) 471-4593

Attorneys for the Plaintiff.

FILED

SEP 23 2021

**STATE OF NEBRASKA
DEPARTMENT OF HEALTH AND HUMAN SERVICES DHHS Hearing Office
DIVISION OF PUBLIC HEALTH**

STATE OF NEBRASKA ex rel. DOUGLAS	)	
J. PETERSON, Attorney General,	)	
	)	
Plaintiff,	)	
	)	
v.	)	PETITION FOR DISCIPLINARY
	)	ACTION
MIDWEST MEDICAL TRANSPORT CO.,	)	
E.M.S.,	)	
	)	
Defendant.	)	

The Plaintiff alleges as follows:

ALLEGATIONS COMMON TO ALL CAUSES OF ACTION:

1. Jurisdiction is based on Neb. Rev. Stat. Neb. Rev. Stat. §§ 38-178 and 38-186 (Reissue 2016, Cum. Supp. 2020).
2. At all times relevant herein, the Defendant, Midwest Medical Transport Co., E.M.S., has been the holder of a license (#5158) issued by the Nebraska Department of Health and Human Services Division of Public Health ("Department") to practice as an advanced life support emergency medical service.
3. The Department is the agency in the State of Nebraska authorized to enforce the provisions of the Uniform Credentialing Act regulating the practice of emergency medical services.
4. The Nebraska Board of Emergency Medical Services considered the investigation of this matter and made a disciplinary recommendation to the Attorney General, which recommendation has been considered. Such matters are privileged pursuant to Neb. Rev. Stat. §§ 38-1,105 and 38-1,106 (Reissue 2016).

5. On December 1, 2015, the Defendant entered into an Assurance of Compliance with the Attorney General's Office for allegedly allowing an individual with an expired license to provide patient care. The Assurance of Compliance required the Defendant to "...only utilize licensed out-of-hospital emergency care providers and individuals as identified in 172 NAC 12-004.06C to provide patient care."

6. The Defendant employed C.B. as an emergency medical technician. Between January 3, 2018, and October 4, 2018, C.B. provided patient care on 119 emergency service calls answered by the Defendant. These runs occurred when C.B.'s emergency medical technician license was expired.

7. The Defendant employed K.R. as an emergency medical technician. Between January 3, 2018, and October 14, 2018, K.R. provided patient care on 30 emergency service calls answered by the Defendant. These runs occurred when K.R.'s emergency medical technician license was expired.

8. The Defendant reported the terminations of C.B. and K.R. for practicing after their EMT licenses expired to the Department as required by law.

FIRST CAUSE OF ACTION

9. Paragraphs 1 through 8 are incorporated herein by reference.

10. Neb. Rev. Stat. § 38-178(10) (Cum. Supp. 2020) provides that licensed health professional may be disciplined for "permitting, aiding, or abetting the practice of a profession of the performance of activities requiring a credential by a person not credentialed to do so.

11. Title 172 Neb. Admin. Code., Ch. 12, §004.06D of the Licensure of Emergency Medical Services Regulations provides that only licensed out-of-hospital

emergency care providers and individuals identified in 172 NAC 12-004.06C must be used to provide patient care.

12. Neb. Rev. Stat. § 38-142(2) (Reissue 2016) provides that when a health professional's license expires, the health professional's right to represent himself/herself as a licensed individual and to practice the profession shall terminate.

13. The Defendant's act of allowing K.B. and K.R. to provide patient care after their emergency medical technician licenses had expired is grounds for discipline.

SECOND CAUSE OF ACTION

14. Paragraphs 1 through 13 are incorporated herein by reference.

15. Neb. Rev. Stat. § 38-178(22) (Cum. Supp. 2020) provides that a health professional license may be disciplined for violating an Assurance of Compliance entered into under section 38-1,108.

16. The Defendant's act of allowing K.B. and K.R. to provide patient care after their emergency medical technician licenses had expired constitutes a violation of the Assurance of Compliance set out above in paragraph 5 which is grounds for discipline.

PRAYER FOR RELIEF

WHEREFORE, the Plaintiff prays that the Chief Medical Officer set this matter for hearing, order appropriate disciplinary action pursuant to Neb. Rev. Stat. § 38-186 (Reissue 2016) and tax the costs of this action to the Defendant.

STATE OF NEBRASKA ex rel. DOUGLAS J.
PETERSON, Attorney General,
Plaintiff,

BY: DOUGLAS J. PETERSON, #18146
Attorney General

BY: 
Lisa K. Anderson, #21845
Assistant Attorney General
2115 State Capitol
Lincoln, NE 68509
(402) 471-4583

Attorneys for Plaintiff.

**STATE OF NEBRASKA
THE DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF PUBLIC HEALTH**

LICENSURE UNIT
DEC 11 2015
RECEIVED

IN THE MATTER OF	)	
	)	
THE LICENSE OF	)	ASSURANCE OF COMPLIANCE
	)	
MIDWEST MEDICAL TRANSPORT CO.,	)	
E.M.S.	)	

Midwest Medical Transport Company and the Attorney General's Office for the State of Nebraska enter into this Assurance of Compliance by agreeing as follows:

1. Midwest Medical Transport Company is the holder of an Emergency Medical Service Advanced Service license (#5158) issued by the Nebraska Department of Health and Human Services Division of Public Health ("Department").
2. It is alleged that from October, 2014, through March, 2015, Midwest Medical Transport Company allowed an individual with an expired EMT license to provide patient care during emergency service calls.
3. Neb. Rev. Stat. §§ 38-178 (15) (2014 Cum. Supp.) provides that a professional license may be disciplined for violations of the Uniform Credentialing Act or the rules and regulations relating to the particular profession.
4. Title 172 NAC 12-004.06(D) of the Rules and Regulations Relating to Emergency Medical Services provides that only licensed out-of-hospital emergency care providers and individuals, as identified in 172 NAC 12-004.06C may be used to provide patient care.
5. Midwest Medical Transport Company shall only utilize licensed out-of-hospital emergency care providers and individuals as identified in 172 NAC 12-004.06C to provide patient care.

6. Neb. Rev. Stat. § 38-178(21) (2014 Cum. Supp.) provides that a professional license may be disciplined for violating an Assurance of Compliance.

7. This Assurance of Compliance is not considered disciplinary action against the Midwest Medical Transport Company emergency medical service license.

8. This Assurance of Compliance is entered into pursuant to Neb. Rev. Stat. § 38-1,108 (Reissue 2008) and shall become effective ten (10) days from the date it is signed by the Attorney General's Office.

Dated this 1st day of December, 2015.


Jeff Shullaw, Manager
Midwest Medical Transport Co.

State of Nebraska)
County of Platte) ss.

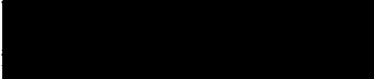
This Agreed Settlement is acknowledged before me by Jeff Shullaw, Manager, Midwest Medical Transport Co., on this 1 day of December, 2015.



Kristin K. Williams
Notary Public
My Commission Expires: Aug 3, 2016

Dated this 7th day of December, 2015.

BY: Douglas J. Peterson, #18146
Attorney General

By: 
Edward Vierk, #22118
Assistant Attorney General
2115 State Capitol
Lincoln, NE 68509-8920
(402) 471-3824



STATE OF NEBRASKA
Office of the Attorney General **COPY**
2115 STATE CAPITOL BUILDING
LINCOLN, NE 68509-6920
(402) 471-2682
TDD (402) 471-2682
FAX (402) 471-3297 or (402) 471-4725

DOUGLAS J. PETERSON
ATTORNEY GENERAL

EDWARD VIERK
ASSISTANT ATTORNEY GENERAL

December 10, 2015

Jeff Shullaw, Manger
Midwest Medical Transport Co.
2155 33rd Ave
Columbus, NE 68601

**RE: In the Matter of the License of Midwest Medical Transport CO., E.M.S.
Assurance of Compliance**

Dear Mr. Shullaw:

Enclosed is an executed copy of your Assurance of Compliance. You are encouraged to maintain conformity with the Assurance of Compliance, as a violation can be the basis to take action which would adversely affect your ability to continue to practice emergency medical services in the State of Nebraska. Please call if you have any questions.

Sincerely,

DOUGLAS J. PETERSON
Attorney General

Edward Vierk
Assistant Attorney General

Enclosure

pc: Becky Wisell (w/encl.)

34-1780-8

RECEIVED UNIT

DEC 11 2015

RECEIVED

Exhibit C

List of Property Transfer

**A listing of all capital, property, plant, equipment, receivables and stock owned
by the certificate holder or involved in the transfer**

Brave GAC Holdings, LP is acquiring Paramedics Logistics Holding Company, LLC. Following the closing the Proposed Transaction, (i) Buyer will own 100% of the equity interest of the Company and (ii) the Company's EIN, name and business operations will remain the same.

Exhibit D

Statement of Final Owner

Statement of Final Owner

The final owner will be Brave GAC Holdings, LP. A copy of the Certificate of Limited Partnership and Authority to Conduct Business in New York State under Business Corporation Law § 1304 is appended hereto as **Exhibit 1**.

Messrs. Gumina, Oxnard, and Kim are principals of Grant Avenue Capital, LLC. None of the holdings of Grant Avenue Capital, LLC currently involve ambulance or emergency medical transportation. The chart annexed hereto as **Exhibit 2** indicates holdings of Grant Avenue, LLC that are supportive of the healthcare industry unrelated to ambulance services, as well as Board members subject to fitness and competency through the present application that have board involvement in those other entities.

There have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with the New York State Public Health Law or the laws of other jurisdictions applicable to the companies listed on **Exhibit 2**.

Exhibit 1
Certificate of Limited Partnership
and
Application for New York State
Authority to Operate

Delaware

The First State

Page 1

I, CHARUNI PATIBANDA-SANCHEZ, SECRETARY OF STATE OF THE
STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND
CORRECT COPY OF THE CERTIFICATE OF LIMITED PARTNERSHIP OF
"BRAVE GAC HOLDINGS, LP", FILED IN THIS OFFICE ON THE TWENTY-
SECOND DAY OF OCTOBER, A.D. 2025, AT 4:40 O'CLOCK P.M.



10376353 8100
SR# 20254343629

You may verify this certificate online at corp.delaware.gov/authver.shtml

C. B. Sanchez

Charuni Patibanda-Sanchez, Secretary of State

Authentication: 205112837
Date: 10-22-25

**STATE OF DELAWARE
CERTIFICATE OF LIMITED PARTNERSHIP
OF
BRAVE GAC HOLDINGS, LP**

The undersigned, desiring to form a limited partnership pursuant to the Delaware Revised Uniform Limited Partnership Act, 6 Delaware Code, Chapter 17, does hereby certify as follows:

FIRST: The name of the limited partnership is:

Brave GAC Holdings, LP

SECOND: The address of the registered office in the State of Delaware is located at 251 Little Falls Drive, in the City of Wilmington, County of New Castle, Delaware 19808. The name of the Registered Agent at such address is Corporation Service Company.

THIRD: The name and mailing address of the General Partner is as follows:

Brave GAC Holdings GP, LLC
c/o Grant Avenue Capital LLC
437 Madison Avenue, Suite 1901
New York, NY 10022

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Limited Partnership as of the 22nd day of October, 2025.

Brave GAC Holdings, LP

By: Brave GAC Holdings GP, LLC
its General Partner

/s/ William Gumina
William Gumina, Authorized Signatory

APPLICATION FOR AUTHORITY

**OF
Brave GAC Holdings, LP**

UNDER SECTION 121-902 OF THE REVISED LIMITED PARTNERSHIP ACT

- 1. The name of the limited partnership is Brave GAC Holdings, LP.**
- 2. The jurisdiction of organization is Delaware. The date of organization is October 22, 2025.**
- 3. The office of the limited partnership is to be located in the County of Manhattan State of New York.**
- 4. The Secretary of State of the State of New York is hereby designated the agent of the limited partnership upon whom process served against the limited partnership may be served. The post office address to which the Secretary of State shall mail a copy of any process against the limited partnership served upon him as agent of the limited partnership is c/o Corporation Service Company, 252 Little Falls Drive, Wilmington, County of New Castle, Delaware 19808.**
- 5. The name and address of the registered agent which is to be the agent of the limited partnership upon whom process against it may be served, are Corporation Service Company, 252 Little Falls Drive, Wilmington, County of New Castle, Delaware 19808.**
- 6. The limited partnership is not required to maintain an office in the jurisdiction of its organization. The address of its principal office is:**

**437 Madison Avenue, Suite 1901
New York, NY 10022**
- 7. The name and business or residence address of each general partner is:**

**Brave GAC Holdings GP, LLC
c/o Grant Avenue Capital LLC
437 Madison Avenue, Suite 1901
New York, NY 10022**
- 8. The limited partnership is in existence in the jurisdiction of its organization as of the date this certificate is filed.**

9. The name and address of the Secretary of State or other authorized officer in the jurisdiction of organization of the limited partnership where a copy of its certificate of limited partnership is filed is:

437 Madison Avenue, Suite 1901
New York, NY 10022

Signed by:

William Gumina

88BD64E4B60F427...

William Gumina, Authorized Signatory

Application for Authority

of

Brave GAC Holdings, LP

Under Section 121-902 of the Revised Limited Partnership Act

Filer's Name and Mailing Address:

Brave GAC Holdings, LP

(Name)

c/o Grant Avenue Capital

(Company, if Applicable)

437 Madison Avenue, Suite 1901

(Mailing address)

New York, NY 10022

(City, State and ZIP code)

Exhibit 2
Grant Avenue Capital Portfolio
Summary for Project Brave

Grant Avenue Capital Portfolio Summary for Project Brave
October 2025

Company Name	Description	Board Members also Expected to be on Target Board	Provision of Care in New York State
H2 Health	Physical therapy clinics	Gumina	No
Fortis Home Health and Hospice	Home health and hospice services	Gumina	No
Ovation Healthcare	Outsourced services to hospitals (such as consulting and revenue cycle mgmt)	Gumina / Kim / Oxnard	No
Helios	Management of clinical trial sites	Gumina	No
CREO	Consulting to life science companies	Gumina	No
Performance Home Medical	Distribution of home medical equipment	Gumina / Kim	No

Exhibit E

Current Operating Certificates

Agency Code Number: 0670

Issued: 7/7/2025

Expires: 7/31/2027

NEW YORK STATE DEPARTMENT OF HEALTH

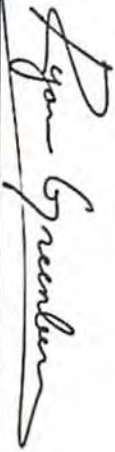
Ambulance Service Certificate

Emergacare NY, LLC

DBA: Empress Emergency Ambulance Services

*is hereby certified as a New York State ambulance service in**accordance with the provisions of Article 30 of the**Public Health Law***PRIMARY TERRITORY:**

Counties of Westchester, Bronx, and New York


Emergency Medical Services Program
Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE

Keep conspicuously posted

Agency Code Number: 5930

Issued: 7/21/2025

Expires: 7/31/2027

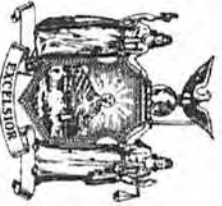
NEW YORK STATE DEPARTMENT OF HEALTH

Ambulance Service Certificate

Empress Ambulance Service, LLC

DBA: Emergacare NY, EMPRESS Ambulance Services, Montefiore,

DBA: EMStar Ambulance, Moblemedic EMS, Mobile Life, Empress EMS

*is hereby certified as a New York State ambulance service in**accordance with the provisions of Article 30 of the**Public Health Law***PRIMARY TERRITORY:**Counties of Westchester, Rockland, Putnam, Dutchess, Orange, Ulster, Sullivan, City of Yonkers, Bronx County
Community Boards of BX05, BX06, BX07, BX08, BX10, BX11, BX12

A handwritten signature in black ink, appearing to read "Lynn Greenbaum".

Emergency Medical Services Program

A handwritten signature in black ink, appearing to read "Eric Miller MD".

Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE**Keep conspicuously posted**

Exhibit F

Affirmations of Fitness and Competency (DOH Form 3778)

Affirmation of Fitness and Competency

By completing this form, you are aware that the NYS Department of Health will be conducting a detailed background review in order to determine fitness and competency in accordance with Article 30 of the NYS Public Health Law.

Emergacare NY, LLC and Empress Ambulance Service

0670 and 5930

Name of EMS Agency

NYS EMS Agency Code

Brave GAC Holdings, LP

Full Name of Corporate Entity requiring F&C review as a new owner/operator

William J. Gumina

Limited Partnership

Full Name of Individual

Title

437 Madison Avenue, Suite 1901, New York, NY 10022

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005[5]).

YES NO

- | | | |
|--------------------------|-------------------------------------|--|
| ☐ | ☒ | Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state. |
| ☐ | ☒ | Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state. |
| ☐ | ☒ | Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state. |
| ☐ | ☒ | Home or residence licensed by NYS or equivalent in any other state. |
| ☐ | ☒ | Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state. |

→ If **NO** has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If **YES** has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences.

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

Full Name William Gumina
Signature [Signature] Date 10/28/25

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

Full Name William Gumina
Signature [Signature] Date 10/28/25

Notary Public Affirmation and Acknowledgement

Notary Public Name Timothy Hannigan
Signature [Signature] Date 10/28/25

Timothy C. Hannigan
Notary Public, State of New York
Qual. in Albany Co. No. 02HA6270969
Commission Expires October 29, 2029

Please affix Notary Public Stamp or equivalent.

Affirmation of Fitness and Competency

By completing this form, you are aware that the NYS Department of Health will be conducting a detailed background review in order to determine fitness and competency in accordance with Article 30 of the NYS Public Health Law.

Emergacare NY, LLC and Empress Ambulance Service, LLC

0670 and 5930

Name of EMS Agency

NYS EMS Agency Code

Brave GAC Holdings, LP

Full Name of Corporate Entity requiring F&C review as a new owner/operator

William J. Gumina

Board Member

Full Name of Individual

Title

New York, NY 10028

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

1970

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005(5)).

YES NO

- ☐ ☒ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state.
- ☐ ☒ Home or residence licensed by NYS or equivalent in any other state.
- ☐ ☒ Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state.

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→ If **YES** has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences.

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

William J. Gumina

Full Name

Signature



Date

10/27/25

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

William J. Gumina

Full Name

Signature



Date

10/27/25

Notary Public Affirmation and Acknowledgement

Notary Public Name

Signature

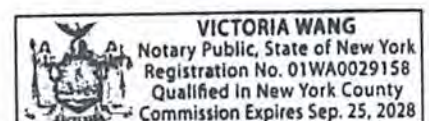
Victoria Wang



Date

10/27/2025

Please affix Notary Public Stamp or equivalent.



William (Buddy) Gumina

[REDACTED] New York, NY. 10028 | 917 [REDACTED] | [REDACTED]

[LinkedIn](#)

PROFESSIONAL EXPERIENCE

Grant Avenue Capital

Founder and Managing Partner

New York, NY

September 2017 - Present

Apax Partners

Equity Partner

New York, NY

March 1988 - September 2017

Donaldson, Lufkin & Jenrette

Associate

New York, NY

June 1995 - March 1998

EDUCATION

Harvard Business School

Master of Business Administration (MBA)

Boston, MA

1994 - 1996

Yale University

Bachelor of Science in Political Science and Government

New Haven, CT

1988 - 1992

David J. Schneider
GOVERNOR

NEW YORK STATE USA

DRIVER LICENSE



ID

[REDACTED]

Class D

GUMINA
WILLIAM, JOHN

NEW YORK, NY 10028

DOB [REDACTED] 1970

Issued 05/04/2025

Expires [REDACTED] 2027

E NONE

R B

Sex M Height 5'-06" Eyes HAZ

WJG
L E L K L C

EXCELSTOR
PLURIBUS UNUS



Affirmation of Fitness and Competency

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Emergacare NY, LLC and Empress Ambulance Service, LLC

0670 and 5930

Name of EMS Agency

NYS EMS Agency Code

Brave GAC Holdings, LP

Full Name of Corporate Entity requiring F&C review as a new owner/operator

Eric J. Kim

Board Member

Full Name of Individual

Title

Jersey City, NJ 07302

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

1991

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005[5]).

YES NO

- ☐ ☒ Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state.
- ☐ ☒ Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state.
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- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences.

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

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Eric J. Kim

Full Name



Signature

10/27/2025

Date

Certification of Fitness

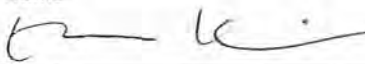
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Eric J. Kim

Full Name



Signature

10/27/2025

Date

Notary Public Affirmation and Acknowledgement

Victoria Wang

Notary Public Name

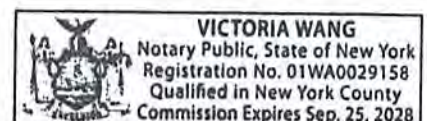


Signature

10/27/2025

Date

Please affix Notary Public Stamp or equivalent.



Eric Kim

[REDACTED] Jersey City, NJ. 07302 | 201-[REDACTED] | [REDACTED] | [LinkedIn](#)

PROFESSIONAL EXPERIENCE

Grant Avenue Capital **New York, NY**
Principal August 2019 - Present

Morgan Stanley **New York, NY**
Private Equity Associate August 2016 - July 2019

Bank of America **New York, NY**
Investment Banking Analyst April 2014 - June 2016

Citi **New York, NY**
Analyst June 2013 - April 2014

EDUCATION

Duke University **Durham, NC**
Bachelor of Science in Economics 2009 - 2013

Bergen County Academics **Hackensack, NJ**
AAST, Science & Technology 2005 - 2009

NEW JERSEY NJMVC

New Jersey Motor Vehicle Commission

AUTO DRIVER LICENSE

Letricia Little-Hayes
Acting Chief Administrator



NOT FOR "REAL ID" PURPOSES

DL [REDACTED]

CLASS D

DOB [REDACTED]

-1991

ISS

02-23-2024

EXP

[REDACTED]-2028

KIM
ERIC J

[REDACTED]
ENGLEWOOD CLFS, NJ 07632-2611

END NONE
RESTR NONE

GENDER M HGT 5'-10" EYES BRN
WV WV202405400002879 REN

24.00



Affirmation of Fitness and Competency

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Emergacare NY, LLC and Empress Ambulance Service, LLC	0670 and 5930
Name of EMS Agency	NYS EMS Agency Code
Brave GAC Holdings, LP	
Full Name of Corporate Entity requiring F&C review as a new owner/operator	
Benjamin C. Oxnard	Board Member
Full Name of Individual	Title
██████████ Brooklyn, NY 11211	
Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator	
██████████	1996
Social Security Number (this is not releasable under the provisions of FOIL)	Date of Birth

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- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
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Certification of Competency

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If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

Benjamin C. Oxnard

Full Name

Benjamin C. Oxnard

Signature

10/27/25

Date

Certification of Fitness

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Benjamin C. Oxnard

Full Name

Benjamin C. Oxnard

Signature

10/27/25

Date

Notary Public Affirmation and Acknowledgement

Victoria Wang

Notary Public Name

[Signature]

Signature

10/27/2025

Date

Please affix Notary Public Stamp or equivalent.



Benjamin C. Oxnard

██████████ Brooklyn, NY. 11211 | 714-██████████ | ██████████ | [LinkedIn](#)

PROFESSIONAL EXPERIENCE

Grant Avenue Capital **New York, NY**
Vice President February 2021 - Present

Hammond Hanlon Camp, LLC **New York, NY**
Healthcare Investment Banking Senior Analyst July 2020 – February 2021
Healthcare Investment Banking Analyst July 2018 – June 2020

Ernst & Young, LLP **New York, NY**
Financial Services Office, Technology Advisory Consultant June 2017 – August 2017

EDUCATION

New York University - Leonard N. Stern School of Business **New York, NY**
Bachelor of Science in Finance and Computing & Data Science August 2014 – May 2018

SKILLS & INTERESTS

Certifications: Bloomberg, Series 79, Series 63

Technical Skills: S&P Capital IQ, Microsoft Office Suite, Python, Java, SQL, R and VBA

California

USA

DRIVER LICENSE

FEDERAL
LIMITS
APPLY



DL

EXP

2026

CLASS C

END NONE

LN OXNARD

FN BENJAMIN CHARLES

YORBA LINDA, CA 92887

DOB

1996

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SEX M

HAIR BLN

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HGT 5'-07"

WGT 130 lb

ISS

DD 08/08/2011586RB/BBFD/26

01/27/2021

Benjamin C Doe

Tab

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Empress Ambulance Service LLC and Emergacare NY LLC

5930 and 0670

Name of EMS Agency

NYS EMS Agency Code

Brave GAC Holdings LP

Full Name of Corporate Entity requiring F&C review as a new owner/operator

Herman M Schwarz

Board Member

Full Name of Individual

Title

Atlanta, GA 30338

Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator

1962

Social Security Number (this is not releasable under the provisions of FOIL)

Date of Birth

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Herman M Schwarz

Full Name

Signature

Date

10/28/2025

Certification of Fitness

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Herman M Schwarz

Full Name

Signature

Date

10/28/2025

Notary Public Affirmation and Acknowledgement

Suzanne Fountain

Notary Public Name

Signature

Date

10-28-2025

Please affix Notary Public Stamp or equivalent.



HERMAN M. SCHWARZ

Atlanta, GA 30338

cell 770-

SUMMARY

Senior executive with successful track record of delivering strong financial performance while providing hands-on strategic and operations leadership. Experienced in a variety of environments ranging from start-up to mature, growth oriented to turnaround, private equity owned to publicly traded, service to manufacturing, and commercial sales to government contracting. Proven skills in profit & loss accountability, strategic vision, operations management, sales and marketing leadership, organization culture, and corporate governance.

Professional Experience

PatientCare EMS Solutions

2018 - present

Chief Executive Officer Nov 2018 – present
Chairman of the Board June 2018 - Nov 2018

Responsible for strategic vision and financial/operational performance of emergent and non-emergent patient logistics company across the continental U.S.:

- Assumed Board Chairman role shortly after private equity sponsor closed on acquiring the company assets from a non-profit hospital system; led the development of an operating platform and separation from hospital systems.
- Named CEO in conjunction with an acquisition that materially expanded the platform and service geography; seamlessly integrated this business as well as seven additional acquisitions to pursue strategy of concentrating in regional geographies and balancing the service mix of the company.
- Developed operating KPIs and created a weekly dashboard; restructured and reorganized the management team; introduced new compensation models to reinforce a growth and financial performance objective.
- Led the company through the challenges of the COVID pandemic and consequential industry labor shortage.

Redflex Holdings – Board of Directors

2014 - 2019

People, Culture and Remuneration Committee Chairman
Risk & Compliance Committee
Nominating Committee

Provide operational, government contracting and strategic expertise to publicly traded (ASX) Australian company that delivers red light and speed photo enforcement. Actively involved in turnaround efforts including rebuilding the management team and re-allocation of resources to new geographies as company recovers from a bribery scandal that impacted market reputation and financial performance. Specific responsibilities include identifying and vetting Board candidates, leading internal review of Board performance and ensuring company's compliance efforts meet rigid standards.

LogistiCare Solutions

2007 - 2017

Chief Executive Officer 2009 - 2017

Developed, communicated and executed the strategic vision and financial/operational performance of the largest non-emergency transportation management company in the Medicaid and Medicare space:

- Succeeded founder as CEO shortly after integration of company into Providence Service Corp (NASDAQ: PRSC) and led a nationally distributed organization in using a proprietary technology to manage delivery of over 65 million trips in 2016.
- Recorded a 16.3% annual organic growth rate by increasing revenue from \$381 million in 2008 to \$1.2 billion in 2016.
- Increased margin in a highly scrutinized industry growing EBITDA from \$20.4 million in 2008 to \$92.4 million in 2016.

- Created a new sales and account management organization focused on pipeline and client touchpoints that led to winning key state-based contracts. Established dominant market share with managed care organizations increasing revenues generated by MCO clients from \$49.4 million in 2008 to over \$480 million in 2016.
- Managed increase in employee base from 650 to nearly 4,000 associates, while expanding operations from 15 to 39 states
- Built a culture of performance and service by initiating incentive based compensation programs, succession planning and operating scorecards
- Interacted closely with executive management and Board of Directors of parent company.
- Generated 65-75% of PRSC's total revenues and EBITDA with market capitalization growing from \$140 million to \$550 million.
- Participated in due diligence associated with the acquisition of two divisions for PRSC.

Chief Operating Officer 2007 - 2009

- Executed significantly improved operating performance in one year that led to the successful sale of LogistiCare from private equity owners (Charterhouse Group and Summit Partners) to PRSC at a multiple of 9.5 times EBITDA.
- Reorganized operations into a regional structure to provide more sophisticated oversight and reporting; introduced companywide measurements of performance standards.
- Implemented a cultural shift in operations emphasizing general management and accountability for P&L and service performance at the local market level.
- Increased focus on execution to meet the needs of all stakeholders by requiring and measuring community and political outreach.

C3 Marketplace, LLC

2005 - 2006

Founder and Partner

Built a start-up buying service and sourcing venture delivering direct pricing from Asia to small and medium sized retailers and manufacturers. Partnered with long time associate to provide leadership through the start-up phase including raising capital, business development, designing infrastructure, and managing financial, legal and accounting matters.

Aegis Communications Group, Inc.

2000 - 2004

Aegis Communications

President, Chief Executive Officer, and Director 2001 - 2004

Led the country's seventh largest (\$185 million in revenue), publicly traded provider of outsourced call center capacity serving several blue-chip clients in the telecommunications, financial services and membership services segments through 11 widely dispersed domestic call centers. Communicated with the company's public shareholders, private equity sponsors, and outside directors.

- Stabilized a declining revenue stream and managed through significant business impact caused by 9/11 events by improving account management relationships.
- Created and implemented a labor arbitrage program in India.
- Negotiated with lenders and equity sponsors to extend bank relationship and establish new asset based credit facility ultimately improving operating cash flow and paying down the debt.
- Developed and executed Aegis' blueprint for divestiture to a joint venture between a \$4 billion Indian conglomerate and an investment fund managed by Deutsche Bank.
- Sold Elrick & Lavidge, Aegis' marketing research division, for 20X EBITDA and \$8 million gain.

Elrick & Lavidge

President 2000 - 2001

Directed the financial turnaround of Aegis' marketing research division with offices and production facilities in seven locations.

- Improved margins through staff resizing and the introduction of financial accountability measures.

- Executed a wholesale upgrade in management personnel and new incentive programs to create a performance driven cultural.
- Delivered positive financial results within nine months allowing for the ultimate divestiture in a value creating transaction.

National Service Industries

1992 - 2000

Formerly a \$2.5 billion conglomerate with divisions operating in the lighting, chemical, envelope, and textile rental segments (subsequently split into two publicly traded companies).

Selig Industries

President 1999 - 2000

Selected by CEO to run \$35 million specialty chemical and water treatment company during cultural transition from a founding family business atmosphere to a public company subsidiary environment.

- Implemented a new sales model for national accounts and introduced a regional management structure leading to record sales and real sales growth double the historical rate.
- Increased profitability by 10% through improved productivity and overhead reductions
- Only Division President in FY2000 to earn maximum incentive payout based on achievement of targeted profit plan.
- Led the successful effort to attain ISO 9002 quality standard and ISO 14001 environmental management system designations in the same year.

National Linen Service

Various Officer Positions 1992 - 1999

SVP – directed sales and marketing activities for \$310 million textile rental division, managed operating plants in South Florida region and maintained overall responsibility for the company's Healthcare segment. Initiated management team upgrades and physical plant improvements leading to improved customer retention and 9% increase in profits. Delivered positive organic growth for the first time in seven years.

VP Healthcare – overall management responsibility for the \$100 million healthcare segment. Restructured sales and service functions to create a more customer centric offering. Launched major account sales effort utilizing a team selling approach. Directed acquisition of an innovative software firm focused on hospital linen cost management.

VP Planning – initiated and developed the planning process for the company. Designed and managed an activity based costing study to create action plans focused on the more profitable products and customers. Initiated plan for the divestiture of the uniform division.

Mars & Company

1989 – 1992

Senior Consultant

Led project teams for this global strategy consulting firm. Developed strategic alternatives for clients based on product line and distribution channel economics, market trends and competitive landscape.

Arthur Andersen & Co.

1984 - 1987

Senior Accountant

Managed on-site audit engagements for clients in variety of industries. Promoted on fast-track schedule.

Education

M.B.A. Finance, 1989 Wharton School of Business, University of Pennsylvania
 B.S. Commerce, 1984 University of Virginia (*Beta Alpha Psi, Raven Society*)
 Certified Public Accountant (*non-current license*)

Agency Code Number: 5930

Issued: 7/21/2025

Expires: 7/31/2027

NEW YORK STATE DEPARTMENT OF HEALTH
Ambulance Service Certificate

Empress Ambulance Service, LLC

DBA: Emergacare NY, EMPRESS Ambulance Services, Montefiore,

DBA: EMStar Ambulance, Moblmedic EMS, Mobile Life, Empress EMS

is hereby certified as a New York State ambulance service in

accordance with the provisions of Article 30 of the

Public Health Law



PRIMARY TERRITORY:

Counties of Westchester, Rockland, Putnam, Dutchess, Orange, Ulster, Sullivan; City of Yonkers; Bronx County
Community Boards of BX05, BX06, BX07, BX08, BX10, BX11, BX12

Emergency Medical Services Program

Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE

Keep conspicuously posted

Agency Code Number: 0670

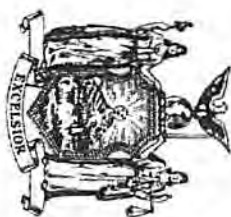
Issued: 7/7/2025

Expires: 7/31/2027

NEW YORK STATE DEPARTMENT OF HEALTH
Ambulance Service Certificate

Emergacare NY, LLC

DBA: Empress Emergency Ambulance Services

*is hereby certified as a New York State ambulance service in**accordance with the provisions of Article 30 of the**Public Health Law*

PRIMARY TERRITORY:

Counties of Westchester, Bronx, and New York

Emergency Medical Services Program

Commissioner of Health

This certificate may be revoked, suspended, limited or annulled for violation of the Public Health Law

THIS CERTIFICATE IS NOT TRANSFERABLE**Keep conspicuously posted**

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Brave GAC Holdings, LP	
Full Name of Corporate Entity requiring F&C review as a new owner/operator	
Jeffrey A. Shullaw	CEO & Board Member
Full Name of Individual	Title
██████████ Elkhorn, NE 68022	
Address of the Individual or Corporate Entity requiring F&C review as a new owner/operator	
██████████	██████████/1967
Social Security Number (this is not releasable under the provisions of FOIL)	Date of Birth

As the proposed new owner/operator of an EMS agency, I hereby certify that I am or have been a director, sponsor, principal, stock holder, operator or operations manager of one or more of the following in the past 10 years (Article 30 §3005[5]).

YES NO

- | | | |
|-------------------------------------|-------------------------------------|--|
| ☒ | ☐ | Emergency Medical Service certified by the NYS Department of Health, or equivalent in any other state. |
| ☐ | ☒ | Hospital, long term care facility or other Article 28 facility licensed by the NYS Department of Health, or equivalent in any other state. |
| ☒ | ☐ | Invalid coach (Ambulette) Service authorized by the NYS Department of Transportation or equivalent in any other state. |
| ☐ | ☒ | Home or residence licensed by NYS or equivalent in any other state. |
| ☐ | ☒ | Halfway house, hostel or residential facility or institution licensed by, or subject to the rules of the NYS Office of Mental Health (OMH) or Office of Mental Retardation and Developmental Disabilities (OMRDD), or equivalent in any other state. |

→ If **NO** has been marked for all of the above, it indicates that there is no history of operating an entity identified in NYS Public Health Law; signing this affirmation is informational only and a testimony to the accuracy of the information provided.

→ If **YES** has been marked for any of the above, on an attached page, please provide the following information for each:

- Name of agency or facility
- Mailing address of facility or agency
- Name of Certifying or Licensing authority
- If applicable, a copy of license, certificate or identification number
- Individual position(s) held with start and end dates

REQUIRED ATTACHMENTS TO THIS AFFIRMATION

- Current resume or curriculum vitae
- Copies of any related licenses and certifications
- Listing of address of residence, or if less than 2 years, addresses of prior residences.

Certification of Competency

By completing and signing this affirmation, I certify that I have operated all of the agencies indicated, in compliance with all applicable statutes, rules, regulations and policies, specifically 10 NYCRR800.

Further, I certify that there have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with NYS Public Health Law during my tenure as a director, sponsor, principal, stock holder, operator or operations manager.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of competency.

Jeffrey A. Shullaw

Full Name

Signature

Date

10/27/25

Certification of Fitness

By completing and signing this affirmation, I certify that I have not been convicted of any crime at anytime, involving murder, manslaughter, assault, sexual abuse, theft, robbery, drug abuse, or sale of drugs, nor have I pleaded nolo contendere to a felony charge relating to any of these offenses.

Further, I certify that, I am not, or was not subject to a state or federal administrative order relating to fraud, embezzlement or patient harm, including, but not limited to actions involving Medicare and or Medicaid.

If you are unable to sign this affirmation, attach copies of all background information, Department orders and/or justification to assist in the review and determination of fitness.

Jeffrey A. Shullaw

Full Name

Signature

Date

10/27/25

Notary Public Affirmation and Acknowledgement

Victoria Wang

Notary Public Name

Signature

Date

10/27/2025

Please affix Notary Public Stamp or equivalent.



Jeffrey A. Shullaw

[REDACTED] Elkhorn, NE. 68022 | 308-[REDACTED] | [REDACTED]

| [LinkedIn](#)

PROFESSIONAL EXPERIENCE

Midwest Medical Transport Company
Chief Executive Officer

Omaha, NE
February 2014 – 2021

Midwest Medical Transport Company
General Manager

Omaha, NE
2004 - 2014

EDUCATION

University of Nebraska
Emergency Medical Technician
Emergency Medical Technician Intermediate
Emergency Medical Technician Paramedic

Lincoln, NE

NEBRASKA

DRIVER'S LICENSE

USA



Pete Ricketts Governor

4d Lic. No. [REDACTED]

4a Iss 11/28/2021

4b Exp 2026

3 DOB 1967

1 SHULLAW

2 JEFFREY A

8 [REDACTED]

ELKHORN, NE 68022

15 Sex M

9 Class O

16 Hgt 6'-00"

9a End M

17 Wgt 200 lb

12 Rest B

18 Eyes HAZ

19 Hair BRO

5 DD 054G08037066N
EQ3D00121333



/67



Jeffrey A. Shullaw

**Affirmation of Fitness and Competency
Explanatory Memorandum for Jeffrey Shullaw**

Jeffrey Shullaw previously served as CEO of Midwest Medical Transport Co. Since 2021, his only involvement with that entity or any of its related companies is as a passive equity holder. Mr. Shullaw has no involvement with the operations or management of that entity, or any of its affiliated companies, at this time. Mr. Shullaw previously served as a paramedic under Nebraska license No. 3024. That license expired on December 31, 2014.

There have been no administrative orders issued by any Federal, State or local agency for matters that are or were recurrent or uncorrected, or dealt with patient harm or neglect in accordance with the New York State Public Health Law or the laws of other jurisdictions applicable to Midwest Medical Transport Co. from his time as CEO of Midwest Medical Transport Co.

The principal place of business for Midwest Medical Transport Co. is 4020 S 147th St, #200, Omaha, Nebraska, 68137.

To the best of Mr. Shullaw's recollection, Ambulance service and paratransit licenses are presently held by Midwest Medical Transport Co. or its affiliated companies (and not Mr. Shullaw) in the following states:

NEBRASKA

Ambulance License number 5158
Nebraska DHHS
301 Centennial Mall South
Lincoln, Nebraska 68509

Wheelchair vans were licensed through Nebraska Public Service Commission previously, but Mr. Shullaw is not aware of any record of a current license for that entity.

OHIO

MIDWEST MEDICAL TRANSPORT COMPANY LLC 251182 46201
Midwest Medivan 181285 46081 Active Ambulette

RHODE ISLAND

MIDWEST MEDICAL TRANSPORT COMPANY LLC DBA MMT AMBULANCE
290 ARMISTICE BLVD
PAWTUCKET, RI 02861

License No: EMS00176
Service Level: Class A (ALS)

VIRGINIA:

Midwest Medical Transport, LLC / DBA MMT Ambulance (50587)
4020 s 147th st, OMAHA, NE – 68137
Ground Ambulance – ALS

KANSAS

Agency No.: 1305
MIDWEST MEDICAL TRANSPORT CO,

IOWA

Midwest Medical Transport Company LLC, NPI 1073296893,
Des Moines, Iowa;
Midwest Medical Transport Company, LLC, d/b/a Fraser Transportation Service,
4780 NE 3RD ST, Des Moines, IA
50313-2362
License # 2001400;
Medicaid Number 1871991125

WISCONSIN

State Agency ID: 6605011

NORTH CAROLINA

State ID: 0118099 MMT North Carolina, LLC