



**STATE OF FLORIDA  
DEPARTMENT OF HEALTH  
BUREAU OF EMERGENCY MEDICAL OVERSIGHT**

**ADVANCED LIFE SUPPORT SERVICE LICENSE**

This is to certify that: **PINELLAS COUNTY EMS AUTHORITY D/B/A SUNSTAR** **Provider Number #: 5220**  
Name of Provider

**12490 ULMERTON ROAD, SUITE 134, LARGO, FLORIDA 33774**  
Address

has complied with Chapter 401, Florida Statutes, and Chapter 64J-1, Florida Administrative Code, and is authorized to operate as an Advanced Life Support Service subject to any and all limitations specified in the applicable Certificate(s) of Public Convenience and Necessity and/or Mutual Aid Agreements for the County(s) listed below:

**PINELLAS**  
County(s)

A handwritten signature in black ink, appearing to read "Michael Hall".

Michael Hall, Section Administrator  
Emergency Medical Services  
Florida Department of Health

**THIS CERTIFICATE EXPIRES ON: 06/30/2026**

This certificate shall be posted in the above mentioned establishment