LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L02000034619

1. Entity Name

SIGNATURE:

GRAYHARRIS CONSULTING, LLC



FILED

03 APR 15 PM 1:21

TALLAHASSEE. FLORIDA

407 843-8880

Date

DO NOT WRITE IN THIS SPACE						
				400016226674		
2. Principal Place of Business		Mailing Address	GL		04/18/0301002014	**50.00
301 E. Pine Street Suite, Apt. #, etc.		301 E. Pine Street Suite Apt # etc.			DO NOT WRITE IN THE	COACE
Suite 1400		Suite 1400		DO NOT WRITE IN THI	5 SPACE	
City & State		City & State		4. FEI Number	Applied For	
Orlando	<u> Florida</u>	Orlando Florida		.da	<u> </u>	X Not Applicable
Zip	Country	Zip Country		ry	5. Certificate of Status Desired	\$5.00 Additional
32801	USA	32801	U	ISA [Fee Required
			7. Name and Address of Current Registered Agent Name		ed Agent	
	PO NOT WEL	Bridgeria Gridre, go gwelena tarawa gridgo Bu		Haydenti	Dempsey	
	DO NOT WRI			Street Address (P.O. Box Number is Not Acceptable) 301 S. Bronough Street		
	IN THIS SPACE					
				Suite 60	00	
					Zip Code	
		City		<u>Tallahas</u>	see	L 32301
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept						
the obligations of registered agent.						
SIGNATURE						
Signature, typed or printed name of registered agent and title if applicable. DATE						
FEE IS \$50.00 Make Check Payable to Florida Department of State DUE BY MAY 1						
9.	MANAGING MEMBERS/M	ANAGERS				
TITLE	MGR		TITLE	(2) 自己的		
NAME	Byrd F. Marshall, Jr.		NAME			
STREET ADDRESS CITY-ST-ZIP	301 E. Pine Street, Suite 1400		THE SERVICE STATES	PEET ADDRESS TY-ST-ZIP		
	Orlando, FL 32801		TENNOSMUM TENNOSMUM	STANDARD AND THE STANDARD STAN		
TITLE	MGR		mæ	Section See a Consultation		
NAME ethect address	Frederick W. Leonhardt		NAME	ME: REET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	301 E. Pine Street, Suite 1400		THE WEST COLUMN	TY-ST-7IP		
+	Orlando, FL 32801		Here de l'aller de l'aller	PORTUGUES AND THE PROPERTY OF THE PROPERTY OF THE PORTUGUES AND TH		
TITLE NAME	MGR		TITLE	tour to the time and the first of the state		
STREET ADDRESS	Dean R. Cannon, Jr. 301 E. Pine Street, Suite 1400		STREET ADDRESS			
CITY-ST-ZIP	Orlando, FL 32801	106 1400	CAN THE STATE OF	ST-ZIP	DO_NOT_WR	ITE
TITLE			TITLE			
NAME	MGR Jason L. Unger		NAME		IN THIS SPA	CE
STREET ADDRESS	301 S. Bronough Street	Suite 600		T ADDRESS		
CITY-ST-ZIP	Tallahassee, FL 32301	, 20200 000		ST-ZIP		
TITLE	14114(140000) 11 02001		TITLE	THE RESTORE OF CHICAGO		
NAME			NAME			
STREET ADDRESS			建设设施 小型联系	T ADDRESS*	angan ang tipunggan panggan pa Banggan panggan pangga	
CITY-ST-ZIP			CITY-	ST-ZIP		
TITLE .			TITLE		and the state of t	
NAME			NAME			
STREET ADDRESS			STREE	T ADDRESS		
CITY-ST-ZIP	.		CITY	ST-ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.						

Byrd F. Marshall, Jr., Manager 4-14-03