

L13000055775

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

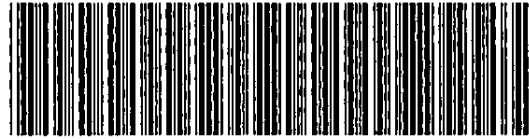
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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13 APR 25 PM 4:19

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
APR 26 2013
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GBHS Equity Partners LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Dale Garner

Name of Person

BGHS Equity Partners LLC

Firm/Company

895 Oak Leaf Ct.

Address

Altamonte Springs, FL 32714

City/State and Zip Code

dale.bghs@rocketmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dale Garner

Name of Person

at (407) 782-8485

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy

CR2E062 (08/05)

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:

L13000055775
GBHS EQUITY PARTNERS LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

The correct name for the LLC is BGHS Equity Partners.
It was incorrectly filed as GBHS Equity LLC. Please
change the name to BGHS Equity Partners LLC.

OR

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: April 22, 2013


Signature of a member or authorized representative of a member

Dale Garner

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

13 APR 25 PM 4:19

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EFFECTIVE DATE
4-18-2013

GBHS Equity Partners LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Dale Garner

895 Oak Leaf Ct.

Altamonte Springs, FL 32714

Mailing Address:

Dale Garner

895 Oak Leaf Ct.

Altamonte Springs, FL 32714

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Dale Garner

Name

895 Oak Leaf Ct.

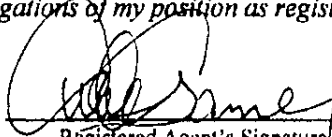
Florida street address (P.O. Box **NOT** acceptable)

Altamonte Springs, FL 32714

City, State, and Zip

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13 APR 12 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Robert Dale Gamer

895 Oak Leaf Ct.

Altamonte Springs, FL 32714

MGRM

Charles F. Barlow

9828-A Tabebuia Tree Dr.

Boynton Beach, FL 33436

MGRM

James A. Scilla

5124 Coronado Ridge

Boca Raton, FL 33486

MGRM

Theodore S. Hudson II

303 Whalley Drive

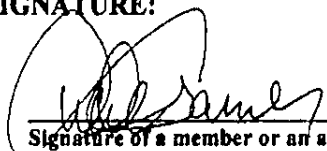
Dothan, AL 36303

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 10, 2013 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Robert Dale Gamer

Typed or printed name of signee

Filing Fees:

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)**