L1800138898

(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
	y/State/Zip/Phone	
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	<u>-</u>
Certified Copies	_ Certificates	s of Status
Special Instructions to F	Filing Officer:	***

Office Use Only



400314361874

400314361874 06/07/18--01004--015 **125.00



18 JUH-7 PH 12: 37

COVER LETTER

TO: New Filing Section Division of Corporations			
SUBJECT: GHRC, LLC			
Name of Limited Liability Company			
The enclosed Articles of Organization and fee(s) are sub	omitted for filing.		
Please return all correspondence concerning this matter to the following:			
Rama kao ma	OCHERIA		
N	ame of Person		
2118 Fieldin	9 Way		
Tallahassee is Vamarao, Mad	State and Zip Code ARY a G GMal. Com future annual report notification)		
For further information concerning this matter, please ca	II:		
	294 - 8807 Code Daytime Telephone Number		
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee. Certified Copy additional copy is enclosed) S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address	Street Address		
New Filing Section Division of Corporations	New Filing Section Division of Corporations		
P.O. Box 6327	Clifton Building 2661 Executive Center Circle		
Tallahassee, FL 32314	2001 Discharie Center Cultis		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
GHRC, L.L.C	
(Must contain the words "Limited Liability Co	mpany, "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:	Mailing Address:
2118 Fielding Way Tallahasser, FL 32311	2118 Fielding Way Tallalansser, PL 32311
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.)	red Agent's Signature: Agent. You must designate an individual or

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

ARTICLE I - Name:

RAMA RAO MAUTERLA

Name

218 Gilling Way

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

Tallahassee, FL 32311

City State Zip

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV- The name and address of each person au Title: "AMBR" = Authorized Member "MGR" = Manager	sthorized to manage and control the Limited Liability Company: Name and Address:	IIII -7 PM 12: 3
MAR		37
MGR	Rama Rao MacHERU	(-)
Mar	SHANASSE FL 32311 SHANASSE FL 32311 THISTORY THISTORY THISTORY THISTORY	
(Use attachment if necessary)		
(If an effective date is listed, the date must be specifically the date of filing.)	ne of filing: 06/07/20/8 (OPTIONAL) pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not but of State's records.	
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	na Par	<u> </u>
This document is exec I am aware that any fal	nember or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes, lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.	

Filing Fees:

ļ

Typed or printed name of signee

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

\$ 5.00 Certificate of Status (Optional)