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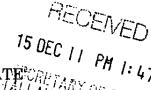


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SECRETARY OF STATE

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FLORIDA DEPARTMENT OF STATE CONTROL OF S

November 3, 2015

LISSETTE VAZQUEZ 333 S.E. 2ND AVENUE, SUITE 2000 MIAMI, FL 33131

SUBJECT: GH ADVISORS, LLC Ref. Number: M15000004298

We have received your document for GH ADVISORS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 615A0002\(\frac{3}{2}\)22

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FILED

www.sunbiz.org

COVER LETTER

TO: Registration S Division of C	Section orporations		
SUBJECT:	GH Ac	e of Limited Liability Company)	
DOCUMENT NUM	BER: <u>450</u>	10004298	
The enclosed Resolu name for use in Flor	tion of the members, n rida and fee are submit	nanagers, or other authorized person ted for filing.	s to Withdraw the Alternat
Please return all corre	espondence concerning	g this matter to the following:	•
<u>Lissetk</u>	me of Contact Person)	<u>z</u>	
Global	Heath Can (Firm/Company)	e advisors, LCC	
333 S.T.	2 Ave. Si	He 2000	
<u>Hiami</u>	FL 3313 ity/State and Zip Code)	<u> </u>	2015 DEC 10 P
For further informati	on concerning this mat	tter, please call:	SH O
Lissette. (Name of Co	vazovez ontact Person)	at (Nea Code) (Daytime Telephone	Number 23
Enclosed is a check i	nade payable to the Flo	orida Department of State for the follo	owing amount:
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (Additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Mailing Address: Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 323		Street Address: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

CR2E128 (2/14)

RESOLUTION TO WITHDRAW ALTERNATE NAME IN THE STATE OF FLORIDA PURSUANT TO 605.0906 (1), FLORIDA STATUTES

I, the undersigned, do hereby certify that I am the Authorized Person of
(Name of Limited Liability Company), a limited liability
company duly organized and existing under the laws of
Because the name of this foreign limited liability company now satisfies the requirements of s. 605.0112, Florida Statutes, the limited liability company hereby renounces the following alternate name in the state of Florida:
GH Pausos LLC
Signature of Authorized Person Make check payable to Florida Department of State and mail to Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314