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SECKE PANY OF STATE
NALL AHASSEE FLORIDA

J. HARREIS

#### **COVER LETTER**

	pstration Section ision of Corporation	ıs				
SUBJECT:	GHE Holdings, LL	С				
CONTROLL			Limited Liability	Company		
		eign Limited Liability Comp d to register the above refere				
Please return	all correspondence c	oncerning this matter to the	following:			
	Liva Siufanua					
		N	ame of Person			•
	Veil Legal, LL0	3				
	· <del>-</del>	Fi	rm/Company			
	10421 South J	ordan Gateway, STE 600	)			
			Address			
	South Jordan,	UT 84095				
		City/S	tate and Zip Code			,
	renewals@veil.d	com				
	<del></del>	E-mail address: (to be used	for future annual	l report not	ification)	
For further in	formation concerning	g this matter, please call:				
Veil	l Legal		877 at (	313-10	43	
	Name o	f Contact Person	Area Code	Day	time Telephone Number	
Divi Reg P.O.	ILING ADDRESS: ision of Corporations istration Section Box 6327 ahassee, FL 32314			Division Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301	
	check for the following 125.00 Filing Fee	ing amount:  ☐ \$130.00 Filing Fee &  Certificate of Status	☐ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, Co of Status & Certified Cop	



May 20, 2016

LIVA SIUFANUA VEIL LEGAL, LLC 10421 SOUTH JORDAN GATEWAY, SUITE 600 SOUTH JORDAN, UT 84095

SUBJECT: GHE HOLDINGS, LLC Ref. Number: W16000036867

We have received your document for GHE HOLDINGS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 816A00010789

### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

1. GHE Holdings, LLC	· ".	• •	٠,			
(Name of Fore	ign Limited Liability Compan	y; must include "Limited Lia	oility Compan	y," "L.L.C.,"	or "LLC.")	
4.5			, ,	`		
(If name unavailable, enter all Liability Company," "L.L.C,"	ternate name adopted for the p		1	he alternate :	name must includ	le "Limited
2 Wyoming		3. <u>81-2172657</u>				•
(Jurisdiction under the law of company is organized)	of which foreign limited liabil	lty .	(FEI numb	er, if applica	ble)	
4	· . · · ·					· .
7+ <u></u> -	(Date first transacted	business in Florida, if prior to & 605.0905, F.S. to determin	registration.)	lity)	<u>9</u>	
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5. 100 077 001 0				,		e ngalise e
Boca Raton, FL 3348			-41			gi generalise
	(Street Addre	ss of Principal Office)			프로 골	111
5. 709 SW 5th St					<u> </u>	
Boca Raton, FL 33486	<b>6</b> .				SE 5	•
		iling Address)				
7. Name and street address	of Florida registered agen	t- (P.O. Box NOT accen	mble)	•		
Name:	REGISTERED AGEN		•	MGR) V	/illiam E Ar	rington -
Office Address:	3030 N. Rocky Po	int Drive, STE 150A	'	(1410) (	·	
	TAMPA		El anida	33607		
	(Ci	10)	_, Florida_	(Zip code	 }	
legistered agent's accepts	•					
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Typed or printed name of signee

## STATE OF WYOMING Office of the Secretary of State

I, ED MURRAY, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

#### **GHE Holdings, LLC**

is a

### **Limited Liability Company**

formed or qualified under the laws of Wyoming did on **April 9, 2016**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2016-000711299**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 12th day of May, 2016 at 11:56 AM. This certificate is assigned 020161216.



Secretary of State

Notice: A certificate issued electronically from the Wyoming Secretary of State's web site is immediately valid and effective. The validity of a certificate may be established by viewing the Certificate Confirmation screen of the Secretary of State's website http://wyobiz.wy.gov and following the instructions displayed under Validate Certificate.