

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000126831

Entity Name: GHMS PABLO LLC**Current Principal Place of Business:**4233 PABLO PROFESSIONAL CT
SUITE 201
JACKSONVILLE, FL 32224**Current Mailing Address:**4233 PABLO PROFESSIONAL CT
SUITE 201
JACKSONVILLE, FL 32224 US**FEI Number:** 81-2017991**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MONTOKA, HERBERT WILLIAM
4233 PABLO PROFESSIONAL CT
SUITE 201
JACKSONVILLE, FL 32224 US*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.***SIGNATURE:** HERBERT WILLIAM MONTOKA

01/30/2023

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MANAGER
Name	MONTOKA, H. WILLIAM
Address	4233 PABLO PROFESSIONAL CT SUITE 201
City-State-Zip:	JACKSONVILLE FL 32224

Title	MANAGING MEMBER
Name	PYLE, JAMES G
Address	4233 PABLO PROFESSIONAL COURT SUITE 101
City-State-Zip:	JACKSONVILLE FL 32224

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JAMES G PYLE

MEMBER

01/30/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date