

DISCLOSURE STATEMENT

NAME OF ENTITY: GROVE STREET HUB LLC

PRINCIPAL PLACE OF BUSINESS: 230 4th Street
Jersey City, N 07302

NAME OF REGISTERED AGENT: Pavan Narkulla

ADDRESS: 14716 NE 76th Street
Redmond, WA 98052

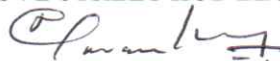
Entity Corporate Structure

GROVE STREET HUB LLC

<u>NAME</u>	<u>ADDRESS</u>	<u>PERCENTAGE OWNED</u>
Pavan Narkulla	14716 NE 76 th Street Redmond, WA 98052	15%
Jagadeshwar Gattu	15407 Forest Haven Lane Frisco, TX 75035	85%

The Applicant certifies that the above represents the names(s) and address(es) of all stockholders or partners of a 10% or greater interest in the above corporation or partnership. If one or more of the above is itself a corporation or partnership. The Applicant has annexed hereto the names and addresses of anyone who owns a 10% or greater interest therein.

GROVE STREET HUB LLC



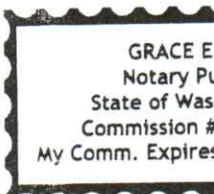
Pavan Narkulla, Managing Member

See Attached Certificate

GROVE STREET HUB LLC

Jagadeshwar Gattu, Managing Member

Sworn Before me this
_____ day of _____, 2024



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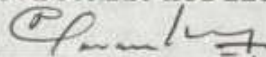
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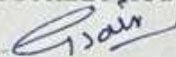
GROVE STREET HUB LLC



Pavan Narkulla, Managing Member

See Attached Certificate

GROVE STREET HUB LLC



Jagadeshwar Gattu, Managing Member



Sworn Before me this _____ day of _____, 2024

WASHINGTON SHORT-FORM INDIVIDUAL ACKNOWLEDGMENT
RCW 42.45.140

State of Washington

County of

King

} ss.

This record was acknowledged before me on

May 2nd 2025

Date

by

Pavan Kumar Narkulla

Name(s) of Individual(s)

GRACE EKLE
Notary Public
State of Washington
Commission # 173813
My Comm. Expires Sep 1, 2026

LE
otic
ington
173813
Sep 1, 2026



Signature of Notarizing Officer

Notary Public

Title (Such as "Notary Public")

Place Notary Seal and/or Stamp Above

My commission expires:

Sept 1st 2026

OPTIONAL

Completing this information can deter alteration of the document or
fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Disclosure Statement

Document Date: _____

Number of Pages: one

Signer(s) Other Than Named Above: _____