

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000085856

**Entity Name:** GALT CONSULTS, LLC

**Current Principal Place of Business:**

540 PLUM ST S  
ST. PETERSBURG, FL 33707

**Current Mailing Address:**

540 PLUM ST S  
ST. PETERSBURG, FL 33707 US

**FEI Number: 85-1060283**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

SEMEYN, JUSTIN  
540 PLUM ST S  
ST. PETERSBURG, FL 33707 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	VP
Name	SEMEYN, JUSTIN	Name	FORKNER , JOCI MARINE DR.
Address	540 PLUM ST S	Address	540 PLUM ST S
City-State-Zip:	ST. PETERSBURG FL 33707	City-State-Zip:	ST. PETERSBURG FL 33707

*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: JUSTIN SEMEYN**

**OWNER**

**01/09/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date