

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000122783

Entity Name: GALILA, LLC

**FILED**  
**Oct 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

8215 BLAIKIE COURT  
SARASOTA, FL 34240

**New Principal Place of Business:**

**Current Mailing Address:**

8215 BLAIKIE COURT  
SARASOTA, FL 34240

**New Mailing Address:**

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

DEVALD, YARON  
8215 BLAIKIE COURT  
SARASOTA, FL 34240 US

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

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: YARON DEVALD

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: DEVALD, YARON  
Address: 8215 BLAIKIE COURT  
City-St-Zip: SARASOTA, FL 34240

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: YARON DEVALD

MGR

10/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date