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(Requestor's Name)

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(Address)

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(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

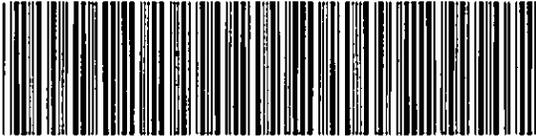
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## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** THE GALERA CONSULTING GROUP, LLC  
\_\_\_\_\_  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

JESSICA MOLINA

\_\_\_\_\_  
(Contact Person)

TIBER SERVICES, LLC

\_\_\_\_\_  
(Firm/Company)

2434 HOLLYWOOD BLVD 2ND FL

\_\_\_\_\_  
(Address)

HOLLYWOOD, FL 33020

\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

JESSICA MOLINA

at ( 954 ) 744-4051

\_\_\_\_\_  
(Name of Contact Person)

\_\_\_\_\_  
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

