

L17000245280

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

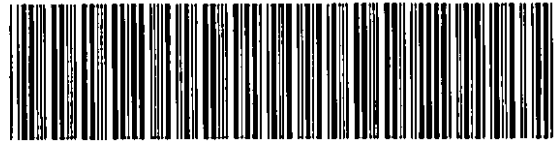
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000320482900

11/06/18--01008--016 **25.00

2018 DEC 14 A 4:29

FILED

D. SCOTT
DEC 18 2018



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 21, 2018

MICHAEL A BLANCO
8360 W FLAGLER ST
SUITE 200
MIAMI, FL 33144

SUBJECT: GALPOX LLC
Ref. Number: L17000245280

We have received your document for GALPOX LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 718A00023947

FILED
DEC 14 A 11:29

2018 DEC 14 11:29 AM

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Galpox LLC

2. (a) <u>80 S.W. 8 Street</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>Suite 2000</u> <u>Miami, FL 33130</u>	(b) <u>80 S.W. 8 Street</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>Suite 2000</u> <u>Miami, FL 33130</u>
--	--

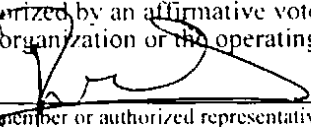
3. <u>11/30/2017</u> Date of filing/registration in Florida	4. <u>L17000245280</u> Document number
--	---

5. (a) Frutos, Kabir
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
145 S.W. 13 Street
 Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*
#319
Miami, FL 33131

(b) Michael A. Blanco
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
8360 West Flagler Street
NEW Registered Office Address:
Suite 200
Miami, FL 33144

2017 DEC 14 A 11:29
 FILED

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

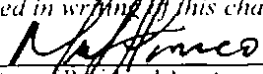


 Signature of a member or authorized representative of a member

Hector Pous

 Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



 Signature of Registered Agent