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S. CHATHAM



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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT:	GALKO CONSULTING GROUP, LLC			
	Name of Limited Liability Company			
Dear Sir or M	adam:			
The enclosed	Registered Agent/Registered Office Change and fee(s) are submitted for filing.			
Please return	all correspondence concerning this matter to the following:			

ANTHONY RUSCELLA
Name of Person
GALKO CONSULTING GROUP LLC
Firm/Company
10546 WINDSOR LAKE CT.
Address
TAMPA, FL 33626
City/State and Zip Code
tjr8669@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTHONY RUSCELLA, 813 577-9475

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount: •

S25 Filing Fee

2 \$55 Filing Fee & Certified Copy

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. Na	me of the limited liability company:GALKO	CONSULT	ING OROU	PL	-L-C	
2. (a)	Note: MUST BE STREET ADDRESS	(b) <u>(() S</u> 2	Hailing address of lim	ited liabi	lity comp	any:
	TAMPA FL	TA	MPA, FL			
	33626		3626			
3.	10/5/20 - EFFECTIVE 10/10/20 Date of filing/registration in Florida	<u> </u>	10000314	· · - · · · · · · · · · · · · · · · · ·	8	
5. (a)	ANTHONY RUSCELLA Registered Agent and Registered Office shown on the records of the	-	Document numbe	r :- :-	2023 .	
	Registered Office Address (MUST BE FLORIDA STREET AL		_		023 JUN 26	****
(b)	TAMPA ,FL ALEENA M. RUSCELLA	33626	-	- 1 - 1	M1 7: 44	
(0)	Enter name of NEW Registered Agent and/or NEW Registered O					
	SAME: 10546 WINDSOR WI	É CT.	_			
	TAMPA, FL	33626	_			
change agent v was/we the arti	mited liability company is not organized under the laws or changes are made, the Florida street address of the regill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of all of organization or the operating agreement of the liability of a member or authorized representative of a member.	egistered office an ility company, it i the limited liabilit mited liability con	d the business offices s hereby confirmed ty company or as of	e of the that the	e registe e chang e provid	ered e(s)
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agree on a file of the appointment as registered agent and agree on so fall statutes relative to the proper and complete point on so favored point of the registered agent as provided for reflect a change in the registered office address. I here is a change of this change.		*1	U		rith the accept ig filed been

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