Florida Department of State Division of Corporations Blectronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000416527 3)))



H230004165273ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

 ∞

fm 具 Address:______

LLC REGISTERED AGENT CHANGE **GALERIAS VIP LLC**

	<u> </u>
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

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	nne of the limited liability company:	.C	
2. (a)	5843 SW 17 th	(b) _	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Miami Florida (US)33155		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10/17/2022 12:00:00 AM	1.2	.22000)447340
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	LEGALING CORPORATE SERVICES INC.		
	Registered Agent and Registered Office shown on the records of 476 Riverside Ave.	of the Florida De	Dept. of State:
	Registered Office Address (MUST BE FLORIDA STREET	<u>TADDRESS)</u>	
	Jacksonville , F	L ³²²⁰²	
(b)	Corporate Creations Network Inc.		2023 DEC
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office ad <u>dro</u>	$\mathcal{L}_{i} = \{ i \in \mathcal{L}_{i} \mid i \in \mathcal{L}_{i} \}$
	801 US Highway I		8 변경
	NEW Registered Office Address:		
	North Palm Beach, F	FL 33408	
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne registered of the limite of the limite	d office and the business office of the registered npany, it is hereby confirmed that the change(s) ted liability company or as otherwise provided in
		Danielle	lle W. Gossman, Special Manager
	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obl to mere	by accept the appointment as registered agent and as ions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, l d in writing of this change.	gree to act in e performand led for in Cha I hereby conf	n this capacity. I further agree to comply with the uce of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed ufirm that the limited liability company has been
myret		e Gossman,	n, Special Secretary
Signatu	re of Registered Agent		