10/26/23, 10:21 AM

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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 : (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.

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GALIUM BAYOU LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA •

SECTION I (1-4 must be completed)

| Name of limited liability Company as it appears State: GALIUM BAYOU LLC | s on the records of the Florida De | partment of | |
|---|--|--|--|
| Enter new principal office address, if applicable: | | | |
| <u>Principal office address</u> MUST BE A STREET ADDRESS) | | | |
| Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) | | ~2 | |
| . The Florida document number of this limited lia | bility company is: M23000013 | 271 | |
| Jurisdiction of its organization: Delaware | | - | |
| Date authorized to do business in Florida: $\frac{10/1}{1}$ | 3/2023 | | |
| ECTION II (5-9 complete only the applicable of | changes) | | |
| . New name of the limited liability company: (must | | | |
| If name unavailable, enter alternate name adopted opy of the written consent of the managers or manust contain "Limited Liability Company," "L.L.C | naging members adopting the alte | siness in Florida and attach a mate name. The alternate name | |
| . If amending the registered agent and/or registere egistered agent and/or the new registered office ag | ed officer address on our records, ddress here: | enter the name of the new | |
| iame of New Registered Agent: | | | |
| lew Registered Office Address: | <u> </u> | | |
| | Enter Florida Street Address | | |
| | City | _, Florida Zip Code | |
| | • | λην Ουας | |
| lew Registered Agent's Signature, if changing Rehereby accept the appointment as registered agenthe provisions of all statutes relative to the proper and accept the obligations of my position as registed ocument is being filed to merely reflect a change fability company has been notified in writing of the | it and agree to act in this capacity and complete performance of my ered agent as provided for in Cha in the registered office address, I | duties, and I am familiar with pter 605, F.S. Or, if this | |
| AMENIA OF THE PROPERTY OF THE | If Changing Registered Agent | , Signature of New Registered Ag | |

| Fitle/ Capacity | Name | Address | Type of Action |
|-----------------|--|---|----------------|
| MGR | Galium Capital LLC | 3323 163RD Street, Suite 508 | □Add |
| | | North Miami Beach, FL 33160 | |
| MGR | Galium Bayou Partners LLC | 3323 163RD Street, Suite 508 | ■Add |
| | | North Miami Beach. FL 33160 | □Remov |
| | | | □Add |
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| | | • •••••••••••••••••••••••••••••••••••• | Remov |
| <u> </u> | | | □Add |
| aforemention | inder the law of which this entity is or | by the official having custody of records in the | □Remov |

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