

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000000288

Entity Name: GALLOWAY CENTER, LLC

Current Principal Place of Business:

7235 CORAL WAY, SUITE 206
MIAMI, FL 33155

Current Mailing Address:

7235 CORAL WAY, SUITE 206
MIAMI, FL 33155

FEI Number: 06-1832274

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FRAGA, LUCY C
7235 CORAL WAY, SUITE 206
MIAMI, FL 33155 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name FRAGA, LUCY
Address 7235 CORAL WAY, SUITE 206
City-State-Zip: MIAMI FL 33155

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUCY FRAGA

MANAGER

03/11/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date