

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000055506

**Entity Name:** GALLOWAY PARTNERS LLC

**Current Principal Place of Business:**

351 NW 42 AVENUE  
SUITE 600  
MIAMI, FL 33126

**Current Mailing Address:**

PO BOX 330044  
MIAMI, FL 33233

**FEI Number:** 45-5243440

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

MARTINI, GREGORY T  
2655 LEJEUNE ROAD  
1101  
CORAL GABLES, FL 33134 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 BOLOOKI, HAMID  
Address 351 NW 42 AVE, SUITE 600  
City-State-Zip: MIAMI FL 33126

*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:** HAMID BOLOOKI

MGR

01/19/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date