

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000160918

**Entity Name:** GALIL 501, LLC

**Current Principal Place of Business:**

1236 DREXEL AVE  
UNIT 2  
MIAMI BEACH, FLORIDE 33139

**Current Mailing Address:**

VIVIES GANEM CPA  
4000 HOLLYWOOD BLVD SUITE 285-S  
HOLLYWOOD, FL 33021 US

**FEI Number:** 83-1483848

**Certificate of Status Desired:** No

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

VIVIE GANEM CPA  
VIVIES GANEM CPA  
4000 HOLLYWOOD BLVD SUITE 285-S  
HOLLYWOOD, FL 33021 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:** FABRICE MARMOUSEZ

06/29/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER	Title	AUTHORIZED REPRESENTATIVE
Name	WILLIAMS AND ROBERTSON	Name	KLEINSINGER, ROBIN
Address	1236 DREXEL AVE UNIT 2	Address	1236 DREXEL AVE UNIT 2
City-State-Zip:	MIAMI BEACH 33139	City-State-Zip:	MIAMI BEACH FLORIDE 33139

*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:** KLEINSINGER

OWNER

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date