## 2021 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

### 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			03/15/2021
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MANAGER	Title	AUTHORIZED REPRESENTATIV	E
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: ALAIN KLEINSINGER

PRESIDENT

03/15/2021

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date