

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000152871

**Entity Name:** AVI GAL LLC

**Current Principal Place of Business:**

5650 STIRLING RD  
STE 4  
HOLLYWOOD, FL 33021

**Current Mailing Address:**

5650 STIRLING RD  
STE 4  
HOLLYWOOD, FL 33021 UN

**FEI Number:** 83-0976879

**Certificate of Status Desired:** No

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

GAL, ADI  
5650 STIRLING RD  
STE 4  
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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name GAL, ADI  
Address 5650 STIRLING RD  
City-State-Zip: HOLLYWOOD FL 33021

Title MGR  
Name NOAH, AVITAL  
Address 8310 PHOENICIAN COURT  
City-State-Zip: DAVIE FL 33328

*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:** ADI GAL

**MANAGER**

**01/29/2021**

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

\_\_\_\_\_  
Date