

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000221866

**Entity Name:** GALLOWAY 120 LLC

**Current Principal Place of Business:**

12101 PINE NEEDLE LANE  
PINECREST, FL 33156

**Current Mailing Address:**

12101 PINE NEEDLE LANE  
PINECREST, FL 33156

**FEI Number: 88-2468010**

**Certificate of Status Desired: No**

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

DE CESPEDES, CARLO ESQ.  
355 ALHAMBRA CIRCLE, SUITE 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	Title	MGR
Name	MESA, ARTURO J	Name	FLORES, JAVIER
Address	12101 PINE NEEDLE LANE	Address	6705 SW 57 AVENUE SUITE 400
City-State-Zip:	PINECREST FL 33156	City-State-Zip:	CORAL GABLES FL 33143

*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: ARTURO JOSE MESA**

**PARTNER**

**04/06/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date