

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000500603

**Entity Name:** GALEAH L.L.C.

**Current Principal Place of Business:**

9540 TIFFANY DR  
CUTLER BAY, FL 33157

**Current Mailing Address:**

9540 TIFFANY DR  
CUTLER BAY, FL 33157 US

**FEI Number:** 35-2783358

**Certificate of Status Desired:** No

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

MORA, ISABEL  
9540 TIFFANY DR  
CUTLER BAY, FL 33157 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            AMBR  
Name            MORA, ISABEL  
Address        9540 TIFFANY DR  
City-State-Zip: CUTLER BAY FL 33157

*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:** ISABEL MORA

MS

03/31/2026

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

\_\_\_\_\_ Date