

**2025 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L23000015721

**Entity Name:** GALLINITA PARTNERSHIP LLC

**Current Principal Place of Business:**

904 NW 15TH AVE  
MIAMI, FL 33125

**Current Mailing Address:**

904 NW 15TH AVE  
MIAMI, FL 33125 US

**FEI Number:** 92-2004940

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC  
7901 4TH ST N STE 300  
ST. PETERSBURG, FL 33702 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:** DAVID ROBERTS

12/03/2025

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name HILLER, DENIS  
Address 7150 INDIAN CREEK DR  
APT 206  
City-State-Zip: MIAMI BEACH FL 33141-3002

*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:** HILLER , DENIS

AMBR

12/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date