

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1500007077

**Entity Name:** GALAXY GP, LLC

**Current Principal Place of Business:**

300 SOUTH TRYON STREET, SUITE 400  
CHARLOTTE , NC 28202

**Current Mailing Address:**

300 SOUTH TRYON STREET, SUITE 400  
CHARLOTTE , NC 28202 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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 SECRETARY  
Name MAYER-SCHULER, BRITTANY  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title MANAGER, CHAIRMAN  
Name POIROT, OLIVIER  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title MANAGER, CFO, TREASURER  
Name HUNT, JEFFREY  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title MANAGER, PRESIDENT  
Name KING, MATTHEW  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

Title ASST. SECRETARY  
Name MCNAMARA, KEVIN  
Address 300 SOUTH TRYON STREET, SUITE 400  
City-State-Zip: CHARLOTTE NC 28202

*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:** JEFFREY HUNT

MANAGER, BY LYNNETTE 04/27/2021  
PENALBERT, ATTORNEY-  
IN-FACT

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

\_\_\_\_\_  
Date