

L1500019183
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: W. Scott Turnbull, Esquire
Account Name : CRARY, BUCHANAN, BOWDISH, ET AL
Account Number : 076424001425
Phone : (772)233-4602
Fax Number : (772)223-4378

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: turnbull@crarybuchanan.com

**LLC REGISTERED AGENT CHANGE
CASTLE RE LLC**

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company, submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida:

1. Name of the limited liability company: CASTLE RE LLC
2. (a) 3221 SW Winding Way Principal office address of limited liability company:
(b) 3221 SW Winding Way Mailing address of limited liability company:
Palm City, FL 34990 Palm City, FL 34990

3. 07/10/2015 Date of filing/registration in Florida
4. L15000119183 Document number

5. (a) Dean W. Crawford Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
3221 SW Winding Way Registered Office Address:
Palm City, FL 34900

(b) W. Scott Turnbull, Esquire Enter name of NEW Registered Agent and/or NEW Registered Office address:
759 SW Federal Highway, Suite 106 NEW Registered Office Address:
Stuart, FL 34984

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of member or authorized representative of member LAURA K. CRAWFORD
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to signify a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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