

**2016 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000040164

**Entity Name:** CASTLEROCK PARTNERS, LLC

**Current Principal Place of Business:**

501 WYCKOFF AVENUE  
WYCKOFF, NJ 07481

**Current Mailing Address:**

501 WYCKOFF AVENUE  
WYCKOFF, NJ 07481 US

**FEI Number:** 20-1237716

**Certificate of Status Desired:** No

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

GRAY ROBINSON, P.A.  
301 EAST PINE STREET, SUITE 1400  
ORLANDO, FL 32801 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:** NORA MILLER, ESQ.

10/18/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name TOUSIGNANT, JAMES M  
Address 501 WYCKOFF AVENUE  
City-State-Zip: WYCKOFF NJ 07481

*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:** JAMES M. TOUSIGNANT

MANAGER

10/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date