

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000139475

**Entity Name:** ASH-CASTLE I, LLC

**Current Principal Place of Business:**

13819 IBIS POINT BLVD  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

13819 IBIS POINT BLVD  
JACKSONVILLE, FL 32224 US

**FEI Number:** 46-3917504

**Certificate of Status Desired:** No

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

ASH, MICHELLE L  
13819 IBIS POINT BLVD  
JACKSONVILLE, FL 32224 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:** MICHELLE L ASH

01/25/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CASTLE, JONATHAN N  
Address 13819 IBIS POINT BLVD  
City-State-Zip: JACKSONVILLE FL 32224

Title MGR  
Name ASH, MICHELLE  
Address 13819 IBIS POINT BLVD  
City-State-Zip: JACKSONVILLE FL 32224

Title MGRM  
Name JONATHAN N CASTLE REV LIV TRST  
DTD 9/17/09  
Address 13819 IBIS POINT BLVD  
City-State-Zip: JACKSONVILLE FL 32224

Title MGRM  
Name MICHELLE L ASH REV LIV TRUST DTD  
9/17/09  
Address 13819 IBIS POINT BLVD  
City-State-Zip: JACKSONVILLE FL 32224

*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:** MICHELLE LYNNE ASH

MANAGER

01/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date