

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000241948

Entity Name: CASTLEROCK FF I, LLC

Current Principal Place of Business:

13799 PARK BLVD. NORTH, #245
SEMINOLE, FL 33776

Current Mailing Address:

13799 PARK BLVD. NORTH, #245
SEMINOLE, FL 33776 US

FEI Number: 82-3510916

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DIAZ, CHRIS
13799 PARK BLVD. NORTH, #245
SEMINOLE, FL 33776 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 MGR
Name DIAZ, CHRIS
Address 13799 PARK BLVD. NORTH, #245
City-State-Zip: SEMINOLE FL 33776

Title MGR
Name CABALLERO, JOE
Address 13799 PARK BLVD. NORTH, #245
City-State-Zip: SEMINOLE FL 33776

Title MGR
Name DIAZ, TONI
Address 13799 PARK BLVD. NORTH, #245
City-State-Zip: SEMINOLE FL 33776

Title MGR
Name CABALLERO, CLAUDINE
Address 13799 PARK BLVD. NORTH, #245
City-State-Zip: SEMINOLE FL 33776

Title MGR
Name POLLOCK, GEORGE JR.
Address 13799 PARK BLVD. NORTH, #245
City-State-Zip: SEMINOLE FL 33776

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: CHRIS DIAZ

MGR

03/02/2020

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date