

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000191425

**Entity Name:** CASTLERIDGE SECURITY SERVICES LLC

**Current Principal Place of Business:**

20497 MEETING STREET  
BOCA RATON, FL 33434

**Current Mailing Address:**

20497 MEETING STREET  
BOCA RATON, FL 33434 US

**FEI Number:** 46-1422321

**Certificate of Status Desired:** No

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

ASGHAR, SAROSH  
20497 MEETING STREET  
BOCA RATON, FL 33434 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	MGRM	Title	MGRM
Name	ASGHAR, SAROSH	Name	RAZA, KHURRAM
Address	20497 MEETING STREET	Address	3545 32ND AVE NE, SUITE #804
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	CALGARY, CANADA AB T1Y 6-M6

*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:** SAROSH ASGHAR

**MANAGER**

**03/13/2023**

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

\_\_\_\_\_  
Date