

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000006833

**Entity Name:** CASTLE POINT LLC

**Current Principal Place of Business:**

9001 COLLINS AVENUE  
S1005  
SURFSIDE, FL 33154

**Current Mailing Address:**

9001 COLLINS AVENUE  
S1005  
SURFSIDE, FL 33154 US

**FEI Number:** 84-3725199

**Certificate of Status Desired:** No

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

HOLLAND, ELIZABETH I  
9001 COLLINS AVENUE  
S1005  
SURFSIDE, FL 33154 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 MATHRANI, SANDEEP L  
Address 9001 COLLINS AVE  
S1005  
City-State-Zip: SURFSIDE FL 33154

*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:** SANDEEP MATHRANI

09/02/2021

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

\_\_\_\_\_  
Date