W200014648

	-
(Remuester's Name)	
LABELLE, FL. 33935	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
, ,	
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.			
1. The name of the limited liability company	is: CASTLE ASSOCIATION MANI	AGEMENT LI	<u>ا</u>
2. The mailing address of the limited liability	company is: 1526 RIVERBEND	DR/Ve	_
LABELLE, FLORIDA 33:	935		
6/11/2002	L02000 1464	18	
3. Date of filing/registration in Florida	4. Document number	• • • • • • • • • • • • • • • • • • • •	_
5. The name of the registered agent and the registered agent age	_	cords of the	
<u> Vebra</u>	Moore		
049M 8181	Name 3 W C T		
	Address		-
West PALM	1 Bench, FL 33466 ty, State and Zip	•	
Cit	ty, State and Zip		
The name and address of the new registered	agent and/or office:		
· lancie	11)elsh		
7025	Name /		
1835	anal Drive		
Florida street addr	ess (P.O. Box NOT acceptable)		
lake Word	46.FL 33467	3 % ₩	
City	, State and Zip		
If the limited liability company is not organize	ed under the laws of the State of Florida, F	hereby	ţ.
confirmed that after the change or changes are	made, the Florida street address of the re	gistered office	ľ
and the business office of the registered agent liability company, it is hereby confirmed that t	the change(s) was/were authorized by an a	ffirmative vote	
the members of the limited liability company of the operating agreement of the limited liability	or as otherwise provided in the articles of	giganization or	
	Company.	ਤੂਜ਼ 3 3	
(Signature of a member or authorized representative of a mer	mber)		
PCTER A STILPAN (Printed or typed name of signee)		श	
• • • • • • • • • • • • • • • • • • • •	agent and agree to act in this canacity	I further acres to	2
I hereby accept the appointment as registered comply with the provisions of all statutes related and I am familiar with and accept the obligation of the control of the limited liable address, whereby confirm that the limited liable	agent and agree to act in this capacity. It ive to the proper and complete performan ons of my position as registered agent as g filed to merely reflect a change in the re lity company has been notified in writing	Turmer agree in the solution of the solution o	,
Family Woloh			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

(Signature of Registered Agent)

INHS18(10/99)