L04000090692

(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nan	ne)			
(Do	ocument Number)	<u>.</u>			
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

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RARES

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COVER LETTER

Division of Corporations	
CASTLE HILL, LLC SUBJECT: Name of Limited Liability	Company
DOCUMENT NUMBER: L04000090692	
The enclosed Resignation of Registered Agent for a Limited for filing.	Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	ne following:
Joy Fledelius	
Name of Person	
GY Corporate Services Inc.	
Name of Firm/Company	
777 S Flagler Dr Ste 500E	
Address	
West Palm Beach, FL 33401	
City/State and Zip Code	
unknown	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Joy Fledelius 561	804-4372
Name of Person at (Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

Mailing Address:

TO: Registration Section

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

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	ions of section 605.01	Florida Statutes, the unc	lersigned.		
GY Corporate Services, Inc. Name of Registered Agent		_ , hereby resigns as			
		ent			
Registered Agent for	CASTLE HILL, LLC				
	Name of Li	mited Liability Company			
1.04000090692					
Document	Number, if known				
A copy of this resigna	tion was mailed to the	above listed limited liabilit	y company at its last k	tnown address.	
The agency is termina	ted and the office disc	ontinued on the 31st day aft Signature of Resigning Agent		his statement is	filed.
If signing on behalf of	fan entity:				
	Joy Fledelius			-1	
	Assistant Secretary	Typed or Printed Name		SEGNE IN ALL MINES	
		Capacity		21 -	
	FILINC \$ 85.00 \$ 25.00	FEES: Active limited liability of Administratively dissolution withdrawn limited liabi	company ved/ voluntarily dissol ility company	5 PH	LED

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL, 32314