2007 LIMITED LIABILITY COMPANY

DOCUMENT # L05000043334

1. Entity Name

FEDÉRICO A CASTILLO LTD.CO.



FILED Feb 14, 2007 08:00 AM Secretary of State

CR2E083 (11/05)

Fee Required

Principal Place of Business

Mailing Address

15145 TANGELO BLVD WEST PALM BEACH, FL 33412 15145 TANGELO BLVD WEST PALM BEACH, FL 33412



DO NOT WRITE IN THIS SPACE

4. FEI Number
00-1561916 Applied For
Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

CASTILLO, FEDERICO A 15145 TANGELO BLVD WEST PALM BEACH, FL 33412

MGRM

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01082007 No Chg-LLC

8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE		
0.0	Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)	DATE
-	Filing Fee is \$50.00 Due by May 1, 2007	
9.	MANAGING MEMBERS/MANAGERS	

CASTILLO, FEDERICO A NAME STREET ADDRESS 15145 TANGELO BLVD CITY-ST-ZIP WEST PALM BEACH, FL 33421 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP

U00000635376 02/23/07-80012-002 50.00

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11. I hereby certify that the information supplied with this fline does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and inatomy 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 receiper or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-10-07

Daytime Phone #