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(Re	equestor's Name)	
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(Do	ocument Number)	
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APR 13 2016 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: Castle Realty Group, LLC. Name of Limited Liability Company				
Dear Sir or Madam:				
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Jason Nagassar Name of Person Castle Realty Group, U.C. Firm/Company 527 N. Mills Avenue Address ORlando, Fl 32803 City/State and Zip Code Castle Realty Group, U.C. Firm/Company Changing Changing Registered agus: Pegistered agus: Pe				
OPLanso, FL 32803 / registered in E				
nagassar @hotmail.com				
E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Jason Nagassav at (407) 8105279 Name of Person Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:				

□ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

\$25 Filing Fee

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

1. Name of the limited liability company:	istle Realty	Cimup LLC.
2. (a) 527 N. Mills Avenue, Oclan	∞ (b) 527 N.	Wills Avenue
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		address of limited liability company: : MAY BE POST OFFICE BOX)
FL 32903	-	ans F1 32603
		(WATE), 12 0 2 0
5/11/2005	L05	000046954
3. Date of filing/registration in Florida	· i · · · · · · · ·	ment number
5. (a) 216 S. Park Avenue S. Registered Agent and Registered Office shown on the record	STE & Winter F s of the Florida Dept. of State:	ark, FL 32789
Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESS)	= .0
527 N. Mills Avenue		5
100	27412	APR AHEIN
Ullanbo.	FL 32805	T SSE
(b)		고 트를
Enter name of NEW Registered Agent and/or NEW Registe	ered Office address:	2: 54
NEW Registered Office Address:		· · ·
527 N. Mills Avenu	ve	
Drlanbo	FL_32803_	
If the limited liability company is not organized under the the change or changes are made, the Florida street address agent will be identical. Or, in the case of a Florida limite was/were authorized by an affirmative vote of the membe the articles of organization or the operating agreement of	s of the registered office and t d liability company, it is herel rs of the limited liability comp the limited liability company.	he business office of the registered by confirmed that the change(s) pany or as otherwise provided in
Signature of a member or authorized representative of a member	Jason	A. Naga SSa R d or typed name of lignee
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and complethe obligations of my position as registered agent as prove to merely reflect a change in the registered office address notified in writing of this change.	agree to act in this capacity.	I further agree to comply with the
Signature of Registered Agent		