

P17000056296

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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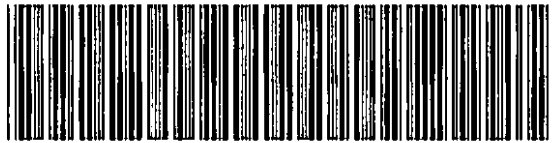
(Business Entity Name)

(Document Number)

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A. RAMSEY
FEB 14 2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CASTILLO DEVELOPMENT, INC.
Name of Corporation

DOCUMENT NUMBER: P17000056296

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

LESLIE D. CARCABA

Name of Contact Person

CASTILLO DEVELOPMENT, INC.

Firm/Company

5 OAK ROAD

Address

ST. AUGUSTINE, FLORIDA 32080

City/State and Zip Code

LESLIE@STAUGUSTINECASTSTONE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LESLIE D. CARCABA

Name of Contact Person

at (904)

669-6032

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.



Mailing Address:

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

Street Address:

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

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: CASTILLO DEVELOPMENT, INC.
2. The principal office address: 5 OAK ROAD, ST. AUGUSTINE, FLORIDA 32080

3. The mailing address (if different): same

4. Date of incorporation/qualification: 6/5/00 Document number: P17000056296

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

STEVEN K. CARCABA

5 OAK ROAD

ST. AUGUSTINE, FLORIDA 32080

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

LESLIE D. CARCABA

5 OAK ROAD

P.O. Box NOT acceptable

ST. AUGUSTINE, FLORIDA 32080

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Leslie D. Carcaba
Signature of an officer or director

LESLIE D. CARCABA, PRESIDENT

Printed or typed name and title

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

Leslie D. Carcaba
Signature of Registered Agent

NOVEMBER 16, 2022

Date

If signing on behalf of an entity:

LESLIE D. CARCABA

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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