

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000049633

**Entity Name:** YOUR CASTLE CARE, LLC

**Current Principal Place of Business:**

4530 WEYBRIDGE STREET  
SARASOTA, FL 34235

**Current Mailing Address:**

4530 WEYBRIDGE STREET  
SARASOTA, FL 34235 US

**FEI Number:** 47-3515125

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEVEREAUX, KIERAN G  
13302 WINDING OAK COURT  
A  
TAMPA, FL 33612 US

*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.*

**SIGNATURE:** KIERAN DEVEREAUX

10/07/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name DEVEREAUX, KIERAN  
Address 4530 WEYBRIDGE STREET  
City-State-Zip: SARASOTA FL 34235

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KIERAN DEVEREAUX

**OWNER**

10/07/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date