

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000060463

Entity Name: KASTAN, LLC

Current Principal Place of Business:

116 CONNERS AVENUE
NAPLES, FL 34108

Current Mailing Address:

116 CONNERS AVENUE
NAPLES, FL 34108 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KASTAN, LOUIS
116 CONNERS AVENUE
NAPLES, FL 34108 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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR	Title	AMBR
Name	KASTAN, LOUIS	Name	KASTAN, LOUIS
Address	116 CONNERS AVENUE	Address	116 CONNERS AVENUE
City-State-Zip:	NAPLES FL 34108	City-State-Zip:	NAPLES FL 34108

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: LOUIS KASTAN

MGR

01/02/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date