

L190000017220

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

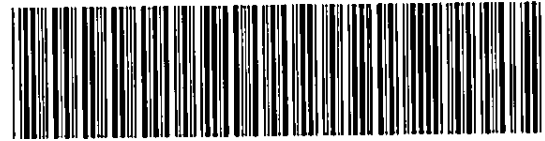
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

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LLC RA & RO
Change

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2024 APR 17 PM 12:13
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TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

A. RAMSEY
APR 17 2024

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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CERTIFIED COPY

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FILING

CHANGE OF RA

1. MONUMENT CAPITAL MANAGEMENT IV, LLC
(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

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: Monument Capital Management IV, LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

2675 South Bayshore Drive, Unit 300-S 2675 South Bayshore Drive, Unit 300-S
Coconut Grove, FL 33133 Coconut Grove, FL 33133

3. 01/15/2019 4. L19000017220
 Date of filing/registration in Florida Document number

5. (a) _____
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Stuart Zook
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
2675 South Bayshore Drive, Unit 300-S
Coconut Grove, FL 33133

2021 APR 17 PM 12:13
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 SECRETARY OF STATE
 TALLAHASSEE, FL 32301

(b) _____
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

CCS GLOBAL SOLUTIONS, INC.
NEW Registered Office Address:
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Stuart Zook Stuart Zook
 Signature of a member or authorized representative of a member Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

/s/ Joanne Caswell Assistant Secretary
 Signature of Registered Agent