6160000	571412
(Requestor's Name)	

(Address)		
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## 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.

Na	me of the limited liability company: <u>Newport G</u>	roup Ma	anagers IV, LLC
(a)		(	(b)
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (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
	04/11/2016		L16000071442
	Date of filing/registration in Florida	4.	Document number
(a)	Registered Agent and Registered Office shown on the records Stuart Zook Registered Office Address (MUST BE FLORIDA STREE		
	2675 South Bayshore Drive, Unit 300-S	TAUDRES	<u> </u>
	Coconut Grove	FL <u>331</u>	33
(b)			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office a	address:
	CCS GLOBAL SOLUTIONS, INC.		
	NEW Registered Office Address:		9:57 E.FL
	155 Office Plaza Drive, 1st Floor		
	Tallahassee	-L 3	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 signce

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

> Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00