L19000017220

(Requestor's Name)			
(Address)			
(Address)	<u></u> <u>_</u>		
(City/State/Zip/Phone #)			
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(Business Entity Name)			
(Document Number)			
Certificates of	Status		
ins to Filing Officer			
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Office Use Only			
	(Address) (Address) (City/State/Zip/Phone #) JP		



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INC. 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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STATEMENT OF CHANGE OF RÉGISTERED 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. Na	ame of the limited liability company: Monument Cap	oital M	anagement	IV, LLC
2. (a)			(b)	
Σ. (α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		.0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	2675 South Bayshore Drive, Unit 300-S		2675 Sc	outh Bayshore Drive, Unit 300-S
	Coconut Grove, FL 33133		Coconut	Grove, FL 33133
	01/15/2019		L1900001	7220
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
	Registered Agent and Registered Office shown on the records of t	he Flori	ia Dept. of Stat	- c:
	Stuart Zook			
	Registered Office Address (MUST BE FLORIDA STREET A	1DDRES	<u>(2)</u>	観えて
	2675 South Bayshore Drive, Unit 300-S			製しの
	Coconut Grove , FL	331	33	MAPRIT PHIZ 13
(b)				-
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	
	CCS GLOBAL SOLUTIONS, INC.			
	NEW Registered Office Address:			-
	155 Office Plaza Drive, 1st Floor			
				_
	Tallahassee , FL	3	2301	_
change agent v was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	register bility c f the lir	ed office and ompany, it is noted in the contract of the contr	d the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
/s/ S	Stuart Zook	St	uart Zook	
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obli to mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h I in writing of this change.	e to ac perforn for in ereby c	t in this cape vance of my o Chapter 605 vonfirm that t	ncity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been
/s/ Jo	panne Caswell Assistant Secretary			

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

Signature of Registered Agent