121000521107

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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.

1. N	ame of the limited liability company: Monument Ridg	gebroo	k MM, LL	
2. (a)		(b)	
2. (4)	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 S	outh Bayshore Drive, Unit 300-S
	Coconut Grove, FL 33133	_	Coconu	t Grove, FL 33133
	12/09/2021		L210005	21103
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
. ,	Registered Agent and Registered Office shown on the records of the	ne Florid	a Dept. of Sta	te:
	Kevin S. Grossfeld c/o Saul Ewing Arnstein 8	& Leh	r LLP	ent.
	Registered Office Address (MUST BE FLORIDA STREET A.	DDRES.	<u>s)</u>	_
	701 Brickell Avenue, 17th Floor			
	Miami , FL	3313	33	7 T
	, 13		·	7 AHIII
(b)	Enter name of NEW Registered Agent and/or NEW Registered (Office ac	ldress:	MATO IT AMII: 18 ANY OF STATE ANY SSEE, FL
	CCS GLOBAL SOLUTIONS, INC.			
	NEW Registered Office Address:			_
	155 Office Plaza Drive, 1st Floor			_
	Tallahassee	3	2301	
change agent v was/wo	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liab ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egister oility co the lin	ed office ar impany, it i nited liabili	ad the business office of the registered s hereby confirmed that the change(s) by 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 obl to mere	by accept the appointment as registered agent and agred ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I he I in writing of this change.	ortorm.	ance of mu	duties and I am Iamilian with and accou
/s/ Jo	panne Caswell Assistant Secretary			

Signature of Registered Agent