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(Requ	iestor's Name)								
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(City/State/Zip/Phone #)										
PICK-UP	☐ WAIT	MAIL								
(Business Entity Name)										
(Document Number)										
Certified Copies	Certificate	es of Status								
Special Instructions to Filing Officer:										





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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: October 8, 2019

Order#: 929194-210

Re: MONTE PACKAGE COMPANY, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.	Na	me of the limited liability company: MONTE PACKA	GE CON	IPANY, LL	.C			
2.	(a)	One CityPlace Drive, Suite 200 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		St. Louis, MO 63141	_					
		04/10/2018		M180000	03455			
3.		Date of filing/registration in Florida	4.		Document numb	ber		
5.	(a)	Corporate Creations Network Inc.						
٦.	(a)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of Stat	– e:			
		11380 Prosperity Farms Road, #221E						
		Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	· · · · · · · · · · · · · · · · · · ·	-			
						س <u>حظ</u>	<u></u>	
	(b)	Palm Beach Gardens FL	33410		-	E 787.39	9 001 10	T) = T)
		Corporation Service Company			·-]jene	; ? :
		Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:		· · · · · ·	<u>=</u>	\bigcirc
		1201 Hays Street			_	ELECTION OF THE PROPERTY OF TH	周二:25	
		NEW Registered Office Address:						
		Tallahassee, FL_	32301		-			
the ag	e cha ent v as/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia the authorized by an affirmative vote of the members of cley of organization or the operating agreement of the	the regis ability co f the limi limited li	tered offic mpany, it i ited liabilit ability cor	e and the busines s hereby confirm y company or as	s office ed that	of the	registered ange(s)
_	Signat	the of member or authorized representative of a member			Printed or typed na	ıme of si	gnee	
pr th to no	ovisi e obl mere stified	by accept the appointment as registered agent and agree on a ll statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change. The of Registered Agent Corporation Service Company	performa I for in C sereby co	ince of my hapter 60: infirm that	duties and lam	familia docum ity com	r with ent is pany h	and accent

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