(Requestor's Name)								
(Address)								
(Address)								
(0) (0) (7) (0)								
(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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Office Use Only



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2023 MAR 28 PM 3: 39

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A SUTLER MAR 2 9 2023 CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195									
REFERENCE : 607028 8280850									
AUTHORIZATION :									
COST LIMIT 55.00 WAY									
ORDER DATE: March 23, 2023									
ORDER TIME : 1:45 PM									
ORDER NO. : 607028-015									
CUSTOMER NO: 8280850									
CHANGE OF AGENT									
NAME: MONSIDO LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Alexxis Weiland-sorenson									

EXAMINER'S INITIALS:

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: MONSIDO LL	_C						
2. (a)	212 W. MAIN ST		(b)	212 W. M	IAIN ST			
(0)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0,		Mailing address of limite (Note: MAY BE POS		-	-
	STE. 500			STE. 500				
	DURHAM, NC 27701			DURHAM	I, NC 27701			
	11/21/2022		i	M2200001	7546			
3.	Date of filing/registration in Florida	4.	-		Document number			
5. (a)					_			
, ,	Registered Agent and Registered Office shown on the records COGENCY GLOBAL INC.	of the Flo	rida	Dept. of State	- e:			
	Registered Office Address (MUST BE FLORIDA STREE	TADDR	ESS,		-			
	115 N. CALHOUN ST., STE. 4						~>	
	TALLAHASSEE	FL_3230)1		-		2023 HAR	7
(1-)	•						\sim	-31
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office	adc	lress:	_		8	
							H∯ (
	Corporation Service Company				_	٠.	1	123
	NEW Registered Office Address:					•	د۔	
	1201 Hays Street				-			
	Tallahassee	FL_3230)1		·-			
change agent v was/we	imited liability company is not organized under the or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member of of organization or the operating agreement of the case of the companication or the operating agreement of the case of the case of the member of the case of the ca	he regis liability s of the he limite	tere cor limi ed li	d office and npany, it is ted liability ability com	d the business office s hereby confirmed t y company or as oth	of the	regis chan	tered ge(s)
Signa	twe of a member or authorized representative of a member	-			Printed or typed name	of signe	c	
provisi the obl to merc	by accept the appointment as registered agent and a cons of all statutes relative to the proper and comple igations of my position as registered agent as providing the reflect a change in the registered office address. I'm writing of this change.	igree to te perfo ded for i I hereby	act rma n C. e co	in this cape nce of my c hapter 605 nfirm that t	acity. I further agre chities, and I am fam , F.S. Or, if this doc the limited liability o	e to co iliar w cument compai	mply ith an t is bei ny has	with the d accept ing filed been
	re of Registered Agent E. Kirby, Asst. Vice President							

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00