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SECTED ARE OF STATE
ALLABASSEE, FLORIDA

K.SALY EXAMINER NOV 20 2013

COVER LETTER

SUBJECT: Pinna	acle Carolina LLC
SOBJECT.	Name of Limited Liability Company
	• • • • • • • • • • • • • • • • • • • •
he enclosed Articles of	Amendment and fee(s) are submitted for filing.
lease return all correspo	ondence concerning this matter to the following:
	Jason Weiss
	Name of Person
	Weiss Law Group, PA
	Firm/Company
	12512 W. Atlantic Blvd.
	Address
	Coral Springs, FL 33071
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
For further information of	concerning this matter, please call:
Jason S W	eiss _{at (} 954 ₎ 573 2800
Name o	of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■ \$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

□\$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

□\$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

13 NOV 18 PM 12: 47

TALLAMASSEE, FLORIDA

Pinnacle Carolina, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on October 17, 2013 and assig			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and end with the word "L.L.C."	ds "Limited Liability Company,	" the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDR	ESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addr		records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
	Enter	Florida street address	
		, Florida	
	City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

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 608, 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.

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

Title	Name	Address	Type of Action
MGRM	Alfred Low	305 South Andrews Ave	Add
		Suite 302	Remove
		Fort Lauderdale, FL 3330	1
MGRM	Luba Kuntz	305 South Andrews Ave	Add
		Suite 302	Remove
		Fort Lauderdale, FL 3330	1_
			Add
			Remove
			-
			Add
			Remove
			_
			_ Add
			Remove
			_
			_ Add
			Remove

November	13	2013
	MAL	
	Signature of	a member or authorized representative of a member

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Filing Fee: \$25.00