

8/27/2021

Division of Corporations
Florida Department of State
 Division of Corporations
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M120000057

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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (614)280-3338
 Fax Number : (954)208-0845

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

2021 AUG 27 AM 9:16

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**LLC REGISTERED AGENT CHANGE
 PINNACLE CARE INTERNATIONAL, LLC**

Certificate of Status	0
Certified Copy	1
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**AUG 30 2021
 S. PRATHER**

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 2021 AUG 27 AM 10:24
 STATE OF FLORIDA
 TALLAHASSEE, FLORIDA

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. Name of the limited liability company: PINNACLE CARE INTERNATIONAL, LLC

2. (a) 250 W. PRATT STREET, STE 1100 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) BALTIMORE, MD 21201 (b) 250 W PRATT STREET, STE. 1100 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) BALTIMORE, MD 21201

3. 01/04/2012 Date of filing/registration in Florida 4. M12000000057 Document number

5. (a) CORPORATE CREATIONS NETWORK, INC Registered Agent and Registered Office shown on the records of the Florida Dept. of State. 801 US Highway 1 Registered Office Address (MUST BE FLORIDA STREET ADDRESS) North Palm Beach, FL 33408

(b) C T Corporation System Enter name of NEW Registered Agent and/or NEW Registered Office address: NEW Registered Office Address 1200 South Pine Island Road Plantation, FL 33324

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member Colleen L. Kallas Printed or typed name of signer

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 605, 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.

By: C T Corporation System James Halpin- Assistant Secretary Signature of Registered Agent