| Name and Address of Current Registered Agent: | | | | |
|---|--|-----------------|----------------------|------------|
| SAVAGE, FELISA 2449 FALLEN TREE DR. E JACKSONVILLE, FL 32246 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. | | | | |
| | | | | |
| SIGNATURE | E FELISA SAVAGE | | | 03/22/2016 |
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | PRES | Title | V PR | |
| Name | SAVAGE, FELISA | Name | BOOTE, KENNETH J | |
| Address | 2449 FALLEN TREE DR. E | Address | 3841 NW 68TH PLACE | |
| City-State-Zip: | JACKSONVILLE FL 32246 | City-State-Zip: | GAINESVILLE FL 32653 | |

Current Mailing Address: 2449 FALLEN TREE DR. E

JACKSONVILLE. FL 32246 US

FEI Number: 59-3731424

Na

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FELISA SAVAGE

PRESIDENT

03/22/2016

FILED Mar 22, 2016 Secretary of State

Certificate of Status Desired: No

CC1309849424

Electronic Signature of Signing Authorized Person(s) Detail

Date

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000011025

Entity Name: PINNACLE VENTURE, LLC

Current Principal Place of Business:

2449 FALLEN TREE DR. E JACKSONVILLE, FL 32246