

F05000003161

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
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****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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**REGISTERED AGENT CHANGE
PINNACLE DESIGN/BUILD GROUP, INCORPORATED**

Certificate of Status	0
Certified Copy	0
Page Count	03
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8/18/10

CAOM

COVER LETTER

TO: Amendment Section
Division of Corporations

7

SUBJECT: Pinnacle Design/Build Group, Incorporated
Name of Corporation

DOCUMENT NUMBER: F05000003161

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Lisa Valero
Name of Contact Person

Pinnacle Design/Build Group, Inc.
Firm/Company

5995 Parkway North Blvd.
Address

Cumming, GA 30040
City/State and Zip Code

LVALERO@PDBGI.COM
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Lisa Valero at (770) 205-4088
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (8/05)

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

*Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of Georgia
_____ in order to change its registered office or registered agent, or both, in the State of Florida.*

1. The name of the corporation: Pinnacle Design/Build Group, Incorporated
2. The principal office address: 5995 Parkway North Blvd., Cumming, GA 30040
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 05/27/2005 Document number: F05000003161
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State: (If resigned, enter resigned)

Corporation Service Company

1201 Hays Street

Tallahassee, FL 32301-2525

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

CT Corporation System

c/o CT Corporation System, 1200 South Pine Island Road

P.O. Box NOT acceptable

Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so
authorized by the board, or the corporation has been notified in writing of the change.

[Signature]
Signature of an officer or director

Stephen Valero, COO

Printed or typed name and title

*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 obligation of my position as registered agent. Or, if this
document is being filed merely to reflect a change in the registered office address, I hereby confirm that the
corporation has been notified in writing of this change.*

By: CT Corporation System
[Signature]
Signature of Registered Agent
Danny Verdecchia, Jr. Asst. Secretary

5/10/10
Date

If signing on behalf of an entity:

CT Corporation System

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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