

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L06000112208

Entity Name: PINNACLE REALTY LLC

FILED
Apr 25, 2009
Secretary of State

Current Principal Place of Business:

951 NE 167 STREET
234
NORTH MIAMI, FL 33162

Current Mailing Address:

951 NE 167 STREET
234
NORTH MIAMI, FL 33162

New Principal Place of Business:

1560 SAWGRASS CORPORATE PARKWAY
400
SUNRISE, FL 33323

New Mailing Address:

1560 SAWGRASS CORPORATE PARKWAY
400
SUNRISE, FL 33323

FEI Number: 87-0787826 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

OLIBRICE, MCOBED P
19800 NW MIAMI CT
MIAMI GARDENS, FL 33169 US

Name and Address of New Registered Agent:

NEW LEVEL ENTERPRISE LLC
1560 SAWGRASS CORPORATE PARKWAY
400
SUNRISE, FL 33323 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: SHELLEY LOZIER

04/25/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: SHELLEY, LOZIER
Address: 5960 NW 14TH PLACE
City-St-Zip: SUNRISE, FL 33313

Title: MGR () Delete
Name: MCOBED, OLIBRICE P
Address: 19800 NW MIAMI CT
City-St-Zip: MIAMI GARDENS, FL MIAMI

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: STACEY, FORTUNAT
Address: 3550 CENTERVILLE HWY STE 107-232
City-St-Zip: SNELLVILLE, GA 30039

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SHELLEY LOZIER

MGR

04/25/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date