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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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(Dusings Fally, Name)		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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SECRETARY OF STATE
TALLAHASSEF ELOSIO

T. HAMPTON

SEP - 2 2008

EXAMINER

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: PINNACLE PROPERTY MANIGEMENT LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and foo(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MS. ANNE STITH
(Name of Person)
PINNACIE PROPERTY MANAGERENT LL C
(Fim/Company)
512 ROYAL TREE LANG
(Address)
OVEIDS FL 32762
(Crty/State and Zip Code)

For further information concerning this matter, please call:

ANNE SHITH	at (
(Name of Person)	(Area Code & Daytime Telephone Number)

Englosed is a check for the following amount:

\$25.00 Filing Fee

□\$30.00 Filing Fee & Certificate of Status

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 Tallabassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the limited liability company as it as of State is: PINNACLE PROPE	ppears on the records of the Florida Department of the MANAGERENT LL C	ent T
2. This limited liability company was organized und	ier the laws of: 	
3. The Florida document/registration number of this \$\Lobo\comp\ 6486\$	s limited liability company is:	
4. I, HAMPA EPUCI TTI (Print Name of Person Resigning)	, hereby resign as a MANAGING 17E	reen
of this limited liability company and affirm the lin resignation in writing.		
Signature of Resigning Member, Managing Mem	ber or Manager	
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)	SE SE	

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