LD8000084054

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
NOV - 6 2012 L. SELLERS		

Office Use Only



700240541017

10/08/12--01028---007 **35.00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Pinnacle Prop. Name of Limi	erty Equity Group, LLC
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	ee Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Summer Jubson Name of Person	· · · · · · · · · · · · · · · · · · ·
. Firm/Company	·
10000 Mandarin Str	ref
Orkland FJ 330-	16
Summer jobson & Gmail. E-mail address: (to be used for future amual report notific	Com-
For further information concerning this matter, p	please call:
Summer Jobson at	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following a	mount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy



October 10, 2012

SUMMER JOBSON 10000 MANDARIN STREET PARKLAND, FL 33076

SUBJECT: PINNACLE PROPERTY EQUITY GROUP, LLC

Ref. Number: L08000084054

We have received your document for PINNACLE PROPERTY EQUITY GROUP, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Leslie Sellers Regulatory Specialist II

Letter Number: 412A00025134

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608. liability company submits the following statement in ord agent, or both, in the State of Florida.	ler to change its registered office or registered
1. Name of the limited liability company:Vinnac/	e Property Equity Group, 11C
2. (a) Principal office address of limited liability compan	y:
(Note: MUST BE STREET ADDRESS)	10000 Mondavin Street Parkland, Ft 33074
(b) Mailing address of limited liability company:	1 10000 Mandanin Street
(Note: MAY BE POST OFFICE BOX)	Parkland, pl 33076
09/03/2008	L08000084054
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	Jubson, Summer
Registered Office Address:	7901 Redwood Lane Perkland, F1.33067
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:	W Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	10000 Mandarin Street- Brilland ,FL 33076
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s of the members of the limited liability company or as othe or the operating agreement of the limited liability company. Signature of a number or buthorized representative of a member Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my portunate of the provisions of the interest of the provisions of the interest of the prand I am familiar with and accept the obligations of my portunate of the provisions of the limited liability company.	Florida street address of the registered office tical. Or, in the case of a Florida lingted was/were authorized by an affirmative vote rwise provided in the articles of organization
	5m €

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

1 . 26