

L69000611848

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 19 AM 9:48

T. HAMPTON

OCT 20 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pinnacle 1525/4071, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John C Gray, Jr.
Name of Person

Pinnacle 1525/4071, LLC
Firm/Company

1525 International Parkway, Ste 4051
Address

Lake Mary, Florida 32746
City/State and Zip Code

jgray@pinnacleorlando.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John C Gray, jr at (407) 333-0090
Name of Person 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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

10 OCT 19 PM 4:00

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

October 13, 2010

JOHN C GRAY, JR
PINNACLE 1525/4071, LLC
1525 INTRNATIONAL PKWY - STE 4051
LAKE MARY, FL 32746

SUBJECT: PINNACLE 1525/4071, LLC
Ref. Number: L09000011848

We have received your document for PINNACLE 1525/4071, LLC and your check(s) totaling \$210.00. 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 LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 910A00024289

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Pinnacle 1525/4071, LLC

2. (a) Principal office address of limited liability company: _____

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(Note: **MUST BE STREET ADDRESS**)

1525 International Parkway, # 4051
Lake Mary, Florida 32746

(b) Mailing address of limited liability company: _____

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(Note: **MAY BE POST OFFICE BOX**)

1525 International Parkway, # 4051
Lake Mary, Florida 32746

2/4/2009

L07000011848

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: Gary Salzman, Gray Robinson, PA

Registered Office Address: 301 E. Pine Street
Suite 1400
Orlando, Florida 32801

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

NEW Registered Agent: John C. Gray, Jr.

NEW Registered Office Address: 1525 International Parkway
(MUST BE FLORIDA STREET ADDRESS) Suite 4051
Lake Mary, FL 32746

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

John C. Gray, Jr.

Printed or typed name of signee

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00