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(F	Requestor's Name)
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PICK-UP	WAIT MAIL
(E	Business Entity Name)
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EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJEC	r: Pinnacle Advisors, LLC (Name of Limited Liability Company)	
The enclo	sed Articles of Organization and fee(s) are submitted for filing.	
Please ret	urn all correspondence concerning this matter to the following:	
_	William A. Dakak (Name of Person)	
	(Name of Person)	
	Pinnacle Advisors, LLC	
	(Firm/Company)	
	40208 Fisher Island Drive	
	(Address)	
	Miami, Florida 33109 (City/State and Zip Code)	
	(City/State and Zip Code)	
For further	r information concerning this matter, please call:	
	Joyce L. Perry at (239) 450-0244 (Area Code & Daytime Telephone Number)	
Enclosed	is a check for the following amount:	
X \$125.00	Filing Fee \$\Bigcup \\$130.00 \text{ Filing Fee & Bigcup Status}\$\$ Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	
	Mailing AddressStreet/Courler AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Pinnade Ad	visors, LLC	
(Must end with the words "Limited Liability Cor	npany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the princip	al office of the Limited Liability Company is:	
Principal Office Address: Ma	uiling Address:	
40208 Fisher Island Drive Miami, Florida 33109	10208 Fisher Island Drives Miami, Florida 33109	
ARTICLE III - Registered Agent, Registered Offi (The Limited Liability Company cannot serve as its own Registered A business entity with an active Florida registration.)		
The name and the Florida street address of the registe	ered agent are:	
WILLIAMADAK	AK	
 		
40208 Fisher I	sland Drive	
•	P.O. Box NOT acceptable)	
Miami FL City, State, and Zi	33109	
City, State, and Zi)	
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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.		
Registered Agent's Signature (R	EQUIRED) · ACC	
(CONTINUED Page 1 of 2	O9 MAR 26 AH 8: 45 SECRETARY OF STATE ALLAHASSEE FLORIDA	

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	WILLIAM A DAKAK
MGRM	Hozos Fisher Island Drive Miami, F1. 33109 Joyce L. Perry 940 Sea Oats Court
MGRM	Marco Island, F1. 34145 Douglas C. Yawn 18082 Clearbrook Circle
M GRM_	Boca Raton, F1. 33498 Pamela H. Jarratt 77 South Birch Rd, Unit 9C Ft. Lauderdale, F1 33316
(Use attachment if necessary)	

ARTICLE V: Effective date, if other than the date of filing: March 23, 2009. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Joyce L. terry
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE
AND ASSEE FLORIDA