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(Requestor's Name)						
(Address)						
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PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						



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EXAMINER

S. HAWKES

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EXAMINER

COVER LETTER

TO: Registration Division of C							
SUBJECT:	Pinnacle Tree and Landscape, LLC						
	Name of Limit						
The enclosed Articles	of Organization and fee(s) are	submitte	ed for fili	ng.			
Please return all corre	spondence concerning this mat	ter to the	e followi	ng:			
	D.		Legge	ett	 -		
		Name o	f Person				
	Legge			s, P.A.			
		Firm/C	ompany				
	4237 Salisbury			13 Buildin	g 1	<u> </u>	
		Ado	iress				
	Jackso	nville,	Florida	32216			
		•	nd Zip Co				
	grant@l E-mail address: (to be used			ces.com	n)		
For further informatio	n concerning this matter, pleas	e call:					
Stu	art Swager	_ at (904	_)		6-8051	
Nam	ne of Person	Area Code & Daytime Telephone Number					
Enclosed is a check	for the following amount:						
]\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	□ Ce	rtified C	ing Fee & Copy opy is enclosed	نا	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Registr Division Clifton 2661 E	Courier Addition Section on of Corporate Building Executive Centers Section 233	tions	rcle	

ARTICLES OF ORGANIZATION OF PINNACLE TREE AND LANDSCAPE, LLC

ARTICLE I - NAME

The name of the limited liability company is Pinnacle Tree and Lands ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1431 Riverplace Blvd., Unit 1003 Jacksonville, Florida 32207

1431 Riverplace Blvd., Unit 1003 Jacksonville, Florida 32207

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

D. Grant Leggett 4237 Salisbury Rd., Suite 113 Building 1 Jacksonville, Florida 32216

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..

D. Grant Leggett

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

Title:

Name and Address:

"MGR" = Manager

"MGMR" = Managing Member

MGMR

Stuart Swager

1431 Riverplace Blvd., Unit 1003 Jacksonville, Florida 32207



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.)

Stuart Swager

Typed or printed name of signee