

L11000015030

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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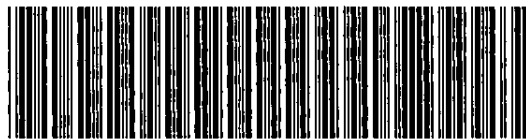
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
12 OCT 12 AM 11:36

OCT 15 2012

T. HAMPTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: PINNACLE A'1 FINANCIAL SERVICES LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

HENNIE C WITHERUP

Name of Person

PINNACLE A'1 FINANCIAL SERVICES LLC

Firm/Company

5655-6 TIMUQUANA ROAD

Address

JACKSONVILLE, FL 32210

City/State and Zip Code

hennie0625@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

HENNIE C WITHERUP

Name of Person

at (904)

536-3091

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 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

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

12 OCT 12 AM 11:36

PINNACLE 1 TAX SERVICES LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 2/11/2011 and assigned
Florida document number L11000015030.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

PINNACLE A1 FINANCIAL SERVICES LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

5655-6 TIMUQUANA ROAD

(Principal office address MUST BE A STREET ADDRESS)

JACKSONVILLE, FL 32210

Enter new mailing address, if applicable:

10695 HAMPTON ROAD

(Mailing address MAY BE A POST OFFICE BOX)

JACKSONVILLE, FL 32257

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

HENNIE C WITHERUP

New Registered Office Address:

1631 CROOKED OAK DR

Enter Florida street address

ORANGE PARK

Florida

32065

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

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.


If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

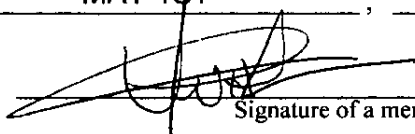
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	HENNIE C WITHERUP	1631 CROOKED OAK DR ORANGE PARK, FL 32065	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

I WOULD LIKE TO CHANGE THE COMPANY'S NAME ONLY.

Dated MAY 1ST, 2012



Signature of a member or authorized representative of a member

HENNIE C WITHERUP

Typed or printed name of signee

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