# 120000a16258

(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:	
<u> </u>	

Office Use Only



000392165100

08/08/22--01010--022 \*\*25.00

SECRETARIAS SEE, FL

2022 AUG -8 PM 1: 26





2804 Gateway Oaks Drive #100 Sacramento, CA 95833

Phone 888-272-3725 Fax 800-603-5868

### REFERENCE # MUST BE ON INVOICE TO BE PAID

Date:

July 25, 2022

Vendor#

1960

Florida Department of State

Division of Corporations PO Box 6327

Tallahassee, FL 32314

FAX:

TO:

850-687-6381

EMAIL:

AE:

Cori Ann Crosthwaite

IEmail:

ccrosthwaite@myparacorp.com

Ref Number:

1824371

Return Shipping:

NAME:

PINNACLE ASSETS LLC

#### FILE REGISTERED AGENT RESIGNATION

State

FL

#### PLEASE EMAIL OR FAX A COPY OF RESULTS

If the document is black and white, please return it to via e-mail and regular mail. If the document has color or any raised seals, please send it via:

CALL IMMEDIATELY IF YOU HAVE ANY QUESTIONS OR THE DEADLINE WILL NOT BE MET 888-272-3725

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	s of section 605.0115, Florida St	atutes, the undersigned,			
ROCKET LAWYER CORPORATE SERVICES LLC		, hereby resign	s as		
	Name of Registered Agent				
Registered Agent for P	innacle Assets LLC				
	Name of Limited Liability (	Company			
L20000216258					
	mber, if known				
A copy of this resignation	n was mailed to the above listed	limited liability company at its	last known ad	dress.	
The agency is terminated	I and the office discontinued on t	he 31st day after the date on wh	nich this stater	nent is	filed.
	Edma Vins	<del></del>			
	Signature of	Resigning Agent			
If signing on behalf of a	ı entity:		AT 938	2022 AUG -8	
	EDNA PERRY			AUG	
	Typed or Printed	1 Name	£	1	
	Asst. Secretary Rocket Lawyer Co	rporate Services LLC	HAS		y guzpa
	Capacity	<del></del>	CO T	矛	
				PH 1:27	
	\$ 25.00 Administr	nited liability company ratively dissolved/ voluntarily in limited liability company	dissolved/		

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314