L21000211329

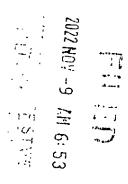
(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

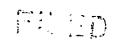
TO:

PINNACLI SUBJECT:	E INSURANCE ADVISORS 1	LC	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Derek Shakhshire		
		Name of Person	
	PINNACLE INSURANCE	E ADVISORS LLC	
		Firm/Company	
	1835 SOUTH PERIMETE	R ROAD, STE 140	
		Address	
	FORT LAUDERDALE, F	L 33309	
	-	City/State and Zip Code	
	dshakhshire@yahoo.com		
	E-mail address: (to be used for future annual report no	rification)
For further information c	oncerning this matter, please c	all:	
Derek Shakhshire		at (<u>984</u>) 616 Area Code Daytir	5-9319
Name o	d Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for the	he following amount:		
☐ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration So	ection
Division of C		Division of Co	•
P.O. Box 632	, 1	The Centre of	1 attaliassee

2415 N. Monroe Street, Suite 810

Tallahassee. FL 32303

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



2022 NOV -9 AH 6:53

PINNACLE INSURANCE ADVISORS LLC

(<u>Name of the Limited Liability Com</u> r (A Florida Limited	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compan Florida document number 1.21000211329	ry were filed on 05/06/2021 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the designation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	1835 SOUTH PERIMETER ROAD, STE 140	
(Principal office address MUST BE A STREET ADDRESS)	FORT LAUDERDALE, FL 33309	
Enter new mailing address, if applicable:	1835 SOUTH PERIMETER ROAD, STE 140	
Mailing address MAY BE A POST OFFICE BOX)	FORT LAUDERDALE, FL 33309	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the name of the new register</u>	
Name of New Registered Agent:		
New Registered Office Address: 1835 SOUTH	PERIMETER ROAD, STE 140 Enter Florida street address	
FORT LAUD		

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 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	CHECCA, MATHEW		□Add
			■Remove
			□Change
MGR	WIEDERSUM, BRYAN		□Add
			= Remove
			□Change
			🗆 Add
			□Remove
			□Add
			□Remove
			□ Change
			∃Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695.026 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ord is filed. Dated October 31st 2022 Signature of a member or authorized representative of a member		
Effective date, if other than the date of filing: (optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 695.02 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the related of the control of the statutory of a member of a member.		
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	Dated	October 518(2022
		Signature of a member or authorized representative of a member
DEREK SHAKSHIRE		- · · · · · · · · · · · · · · · · · · ·

Filing Fee: \$25.00