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## PINNACLE PROPERTY SOLUTIONS ON NORTH FLORIDA LLC

**SUBJECT:** \_\_\_\_\_  
Name of Limited Liability Company

Please return all correspondence concerning this matter to the following:

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Name of Person

Firm/Company
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Address

City/State and Zip Code

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

OZELL SMALL                      904    251-5325  
\_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
Name of Person                  Area Code                  Daytime Telephone Number

☒ \$25.00 Filing Fee
 ☐ \$30.00 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)

**Street Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

PINNACLE PROPERTY SOLUTIONS ON NORTH FLORIDA 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 2/28/2022 and assigned  
Florida document number L22000103180.

This amendment is submitted to amend the following:

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

PINNACLE PROPERTY SOLUTIONS OF NORTH FLORIDA, LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**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:

New Registered Office Address:

*Enter Florida street address*

Florida

*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 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 Changing Registered Agent, Signature of New Registered Agent**

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

[illegible]

[illegible]

(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 605.0207 (3)(b)

If 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 record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

**Filing Fee: \$25.00**

## Articles of Organization

### Florida Limited Liability Company

#### ARTICLE 1

The name of the Limited Liability Company is:

PINNACLE PROPERTY SOLUTIONS OF NORTH FLORIDA LLC

#### ARTICLE II

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

9034 HAWKEYE DR  
JACKSONVILLE, FL 32221

The mailing address of the Limited Liability Company is:

PO BOX 6404  
JACKSONVILLE, FL 32236


#### ARTICLE III

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

OZELL J. SMALL  
9034 HAWKEYE DR  
JACKSONVILLE, FL 32221

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.

Registered agent signature:

DocuSigned by:  
  
B985F281C0954BB  
OZELL J. SMALL

## ARTICLE IV

The name and address of person authorized to manage LLC:

TITLE: CEO  
OZELL J. SMALL  
9034 HAWKEYE DR  
JACKSONVILLE, FL 32221

TITLE: VP  
KIMBERLY R. SMALL  
9034 HAWKEYE DR  
JACKSONVILLE, FL 32221

## ARTICLE V

The effective date for this Limited Liability Company shall be:  
February 28, 2022

Signature of member or an authorized representative

*Ozell Small*

0005F291G0964BB  
OZELL J. SMALL

I am the member or an authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.