

L23000052027

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

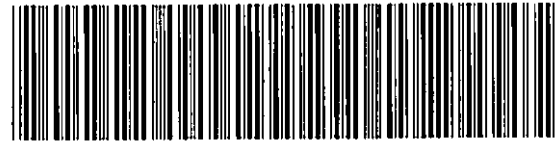
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/07/23--01002--016 **25.00

4/7/23
V.W.



DISPATCH

SECTIONS
FLORIDA

2023 APR -7 AM 11:56

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FL

2023 APR -7 PM 12:14

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PINNACLE PRECIOUS METALS LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROBERT D. HOLLAND

Name of Person

PINNACLE PRECIOUS METALS LLC

Firm Company

1645 PALM BEACH LAKES BLVD

Address

SUITE 1200

City/State and Zip Code

WEST PALM BEACH 33411

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

For further information concerning this matter, please call:

ROBERT D. HOLLAND

412

294-7378

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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 PRECIOUS METALS 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 01/27/2023 and assigned
Florida document number 123000052027.

This amendment is submitted to amend the following:

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

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)

1645 PALM BEACH LAKES BLVD

SUITE 1200

WEST PALM BEACH 33411

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1645 PALM BEACH LAKES BLVD

SUITE 1200

WEST PALM BEACH 33411

FILED
2023 APR -7 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FL

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:

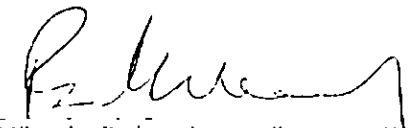
Name of New Registered Agent: ROBERT D. HOLLAND

New Registered Office Address: 1645 PALM BEACH LAKES BLVD SUITE 1200
Enter Florida street address

WEST PALM BEACH, Florida 33411
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

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	SKY A HENDERSON	1615 CONGRESS AVE. STE 103 DELRAY BEACH, FL 33445	☐ Add
		1615 Congress Ave., Ste. 103	☒ Remove
		DeLay Beach, FL 33445	☐ Change
MGR	ROBERT D. HOLLAND	243 NE 103 ST MIAMI SHORES FL 33138	☒ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

D. If amending any other information, enter change(s) here: Other than full access

SKY A HENDERSON AM STOPPING DOWN AND RE SIGNING AS OF 04/07/2023

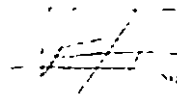
I GRANT ROBERT D HOLL AND FULL ACCESS AND CONSENT ON THIS ETC

F. Effective date, if other than the date of filing: 04/07/2023 (option d)

If an effective date is stated, the date must be specific and cannot be prior to date of filing of this document. Note: If the date inserted in this block does not meet the applicable statutory filing requirements, the date will not be used as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the day specified, the document record is filed.

Dated 04/07/2023



Signature of a member or authorized representative of the entity

SKY A HENDERSON

Typed or printed name of signatory

Filing Fee: \$25.00