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(Requestor's Name) (Address) (Address)	100078415791			
(City/State/Zip/Phone #)	08/07/0601044005 **125.00			
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 8, 2006

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MELISSA O DONNELL 5701 GOLDEN HILLS DRIVE MINNEAPOLIS, MN 55416

SUBJECT: PINNACLEUSA, LLC Ref. Number: W06000034953

We have received your document for PINNACLEUSA, LLC and your check(s) totaling \$125.00. However, the document has not been filed and is being retained in this office for the following:

You did not sumbit the Certificate of Designation of Registerd Agent/Registered Office form, which I have enclosed for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 906A00049355

COVER LETTER

TO: **Registration** Section **Division of Corporations**

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DINNAC SUBJECT: (Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida...

Please return all correspondence concerning this matter to the following:

(Name of Person)				
Alvanz Lit				
(Firm/Company)				
5701 Golden Hills Drive				
(Address)				
MINNEAPOUS, UN 55446 (City/State and Zip Code)				

For further information concerning this matter, please call:

Ulisso D'Donnell at (763) 765 - 6692 (Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS: **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

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

Enclosed is a check for the following amount:

Statute Filing Fee State Stat □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

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j, 1000 IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1.	(Name of Foreign Limited Liability Company)					
2.	(Jurisdiction under the law of which foreign limited liability 3. (FEI number, if applicable) company is organized)					
4.	(Date of Organization) 5 DEMOCHAL (Duration: Year limited liability company will cease to					
6.	exist or "perpetual")					
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)					
7.	Four Battery march Park					
	QUINCY, MA 0219 (Street Address of Principal Office)					
8.	If limited liability company is a manager-managed company, check here 💢					
9. The name and usual business addresses of the managing members or managers are as follows:						
Ronald L. Berger, 5701 Golden Hills Drive, Mpls, Un 55416						
	Darry Chownard, 5701 Golden Hills Drive, Mpls. Un 55416					
	Bhan Gengler, 5701 Endden Hills Drive, Mpls. Mn 55416					
10.	Bhan Gengler, 5701 bidden Hills brive, Mpls. Un 55446 Marjonic Captin, Four Batterymarzh Purk, Quiney. UA 62/69 Attached Isan original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in					
the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a						
	nslation of the certificate under oath of the translator must be submitted.)					
11. Nature of business or purposes to be conducted or promoted in Florida: MMULTING and GUU IS						
of financial planning services and products						
Wompel						
	Signature of a member or an authorized representative of a member.					
	(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)					

MCUSSA O'DONNCU, Assistant Sccrittary Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Pi	nn	acic	USA.	HC

2. The name and the Florida street address of the registered agent and office are:

CT Corporation System	06 S
(Name)	AHA EP 2
1200 South Pine Island Road	LEC
Florida Street Address (P.O. Box <u>NOT</u> ACCEPTABLE)	HILL IS
Plantation, FL 33324	DA S
City/State/Zip	··· ·

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 as provided for Chapter 608, Florida Statutes.

(Signature)

Assistant Secretary

- \$ 100.00 Filing Fee for Application
- **\$ 25.00** Designation of Registered Agent
- \$ 30.00 Certified Copy (optional)
- \$ 5.00 Certificate of Status (optional)



