M08000002724

(Requestor's Name)						
(Address)						
(Address)						
(Ci	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	s of Status				
Special Instructions to Filing Officer:						
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Office Use Only



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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: July 19, 2016

Order#: 198725-004

Re: PINNACLE CREDIT SERVICES, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

2018 JUL 21 A ID: 25

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: Pinnacle Credit	Services,	LLC	
2.	(a)	7900 Highway 7	(b)	7900 Hig	hway 7
	` /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 200		Suite 200	
		Minneapolis, MN, 55426		Minneapoli	is, MN 55426
		06/09/2008		M08000002	2724
3.		Date of filing/registration in Florida	4.	D	Oocument number
5.	(a)	NRAI Services, Inc.			
		Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:	
		1200 South Pine Island Road			
		Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS)</u>		
					7. 2
		Plantation , FL	33324		SECRE JUL T
					TILE IANGE LANASSEE
	(b) Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>			recc.	SACT TIME
		Tantel hame of NEW Registered Agent and/or MAW Registered	Onice and	LCSS.	
		1201 Hays Street			Company of N
		NEW Registered Office Address:			25 200
		Tallahassee , FL	32301		
th ag w	e cha gent v as/wa	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the regis ability co of the limi	tered office a npany, it is l ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		Jee & liane	Jill C	ilmi, Authori:	
	_	ture of a member or authorized representative of a member			Printed or typed name of signee
pr th to no	ovisi e obi mer otifie	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I do no writing of this change. The of Registered Agent Corporation Service Company	performa d for in C hereby co	nce of my di hapter 605, nfirm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed are limited liability company has been by, Assistant Vice President
	-	- Corporation Del Mee Company			• /