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	stration Section sion of Corporatio	ns				
SUBJECT:	Pinnacle Services, i	LLC				
SOBJECT.		Name of	Limited Liability	Company		_
		reign Limited Liability Comp ed to register the above refer				
Please return	all correspondence	concerning this matter to the	following:			
	Bryan Taylor					
		N.	ame of Person	· <u>-</u> ·		
	Pinnacle Servi	ces. LLC				
		Fi	irm/Company			
	2211 Fogerty 2	Ave				
			Address			
	Key West, FL	33040				
		City/S	tate and Zip Code	·		
	bryan@pinnacle	sgc.com				
		E-mail address: (to be used	d for future annual	l report not	ification)	
For further in	formation concerning	g this matter, please call:				
Holl	iy Taylor		303 at (653-37	75	o ==
	Name o	of Contact Person	Area Code	Day	time Telephone Numbe	7 S
Divi Regi P.O. Talla	ILING ADDRESS: sion of Corporation: stration Section Box 6327 shassee, FL 32314 check for the follow	S		Division Registrati Clifton B 2661 Exe	of Corporations ion Section uilding ecutive Center Circle see, FL 32301	EP 27 PH 12: 41
	125.00 Filing Fee	S130.00 Filing Fee & Certificate of Status	S155.00 Filir Certified Copy	ng Fee &	■ \$160.00 Filing Fee of Status & Certified	

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

IN COMPILANCE WITH SECTION 605.0002, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Pinnacle Services. LLC							
•	Limited Liability Company; must include "Limited	d Liabili	y Company," "L. L. C.," or "ELC")				
Pinnacle Services of Flor	ida. LLC name adopted for the purpose of transacting business in Flor	de The		The Course of the Local Local			
2 Colorado	name adopted for the purpose of transacting outsiness in Flor			outy Company, "LLC, or "LLC,)			
_ ,	high foreign limited liability company is organized)	3	20-2653466 (FEI numb	er, if applicable)			
XV. A							
4. N/A	(Date first transacted business in Florida, if prior to r	egistratio	1)				
#1#2 G G G	(See sections 605,0904 & 605 0905, F.S. to determine	ne penalty	liability)				
5. 7173 S Sedalia St (Street Address of)	Principal Office)	6.	7173 S Sedalia St (Mailing Addr	wee)			
Foxfield, CO 80016			Foxfield, CO 80016				
	 						
							
7. Name and street address	ss of Florida registered agent: (P.O. Box	NOT	acceptable)				
Name:	Bryan Taylor		·				
:Name:							
Office Address:	2211 Fogerty Ave						
	Key West		, Florida 33040				
Registered agent's accep	(City)		(Zip code				
to compty with the provisi and accept the obligation	ions of all statutes relative to the proper is of my position as registered agent.		mplete performance of my t	luties, and I am familiar with			
	(Registered agent's si	ignature)					
8. The name, title or capa <u>Title or Capacity:</u>	acity and address of the person(s) who has Name and Address:		authority to manage is/are: (tle or Capacity:	Name and Address:			
President				<u> </u>			
Tresident	Bryan Taylor 2211 Fogerty Ave		ecretary	Holly: Faylor A T			
	Key West, FL 33040	• •		Foxfield, Co 80016			
							
		•					
Allen attenhments if mans	anna)	•					
(Use attachments if neces							
 Attached is a certificate jurisdiction under the law of the translator must be st 	of existence, no more than 90 days old, dof which it is organized. (If the certificate abmitted)	luly aus is in a	henticated by the official had foreign language, a translati	ving custody of records in the on of the certificate under oath			
10. This document is exec submitted in a document to	o the Department of State constitutes a thir	(1) (b) rd degr	, Florida Statutes. I am aware ee felony as provided for in s	that any false information .817.155, F.S.			
	11262 1462						
	Signature o	an autho	nzed person	_			

Typed or printed name of signee

Holly Taylor

OFFICE OF THE SECRETARY OF STATE OF THE STATE OF COLORADO

CERTIFICATE OF FACT OF GOOD STANDING

I, Wayne W. Williams, as the Secretary of State of the State of Colorado, hereby certify that, according to the records of this office.

Pinnacle Services, LLC

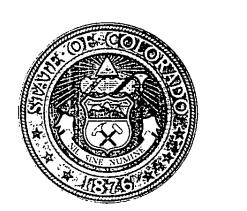
is a

Limited Liability Company

formed or registered on 04/11/2005 under the law of Colorado, has complied with all applicable requirements of this office, and is in good standing with this office. This entity has been assigned entity identification number 20051150067.

This certificate reflects facts established or disclosed by documents delivered to this office on paper through 09/21/2017 that have been posted, and by documents delivered to this office electronically through 09/24/2017 @ 22:09:23.

I have affixed hereto the Great Seal of the State of Colorado and duly generated, executed, and issued this official certificate at Denver, Colorado on 09/24/2017 @ 22:09:23 in accordance with applicable law. This certificate is assigned Confirmation Number 10462445 .



Secretary of State of the State of Colorado

****End of Certificate******************

Notice: A certificate issued electronically from the Colorado Secretary of State's Web site is fully and immediately valid and effective. However, as an option, the issuance and validity of a certificate obtained electronically may be established by visiting the Validate a Certificate page of the Secretary of State's Web site, him www.socsoic.com/first critical account internation entering the certificate's confirmation number displayed on the certificate, and following the instructions displayed. Confirming the issuance of a certificate is merely optional and is not necessary to the valid and effective issuance of a certificate. For more information, visit our Web site, minimal to the valid and effective issuance of a certificate. For more information, visit our Web site, minimals is not necessary to the valid and effective issuance of a certificate.