

M 210000006213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

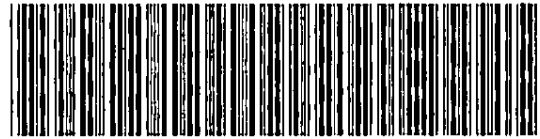
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W210000059811

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APR 12 2021

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SECRETARY OF STATE  
HALL OF RECORDS

US  
5/22/21



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 1, 2021

PETER JOHN PEMBERTON  
64 CROSSING LANE, #A  
SANTA ROSA BEACH, FL 32459

SUBJECT: PNL INVESTMENTS, LLC  
Ref. Number: W21000059511

We have received your document for PNL INVESTMENTS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable : "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

The document number of the name conflict is L12000109604.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Yvette Scott  
Document Specialist II

Letter Number: 421A00009045

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MAY 19 2021

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: PNL Investments, LLC  
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:

Peter John Remberton  
Name of Person

PNL Investments, LLC  
Firm/Company

64 Crossing Lane #A  
Address

Santa Rosa Beach, FL 32459  
City/State and Zip Code

PNL INVESTMENTS831@gmail.com  
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

FILED

For further information concerning this matter, please call:

Peter Remberton at ( 850 ) 543-1454  
Name of Contact Person Area Code Daytime Telephone Number

**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

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee    ☐ \$130.00 Filing Fee & Certificate of Status    ☐ \$155.00 Filing Fee & Certified Copy    ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. PNL Investments, LLC  
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

PNL Investments of FL, LLC

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. Georgia  
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 58-2244750  
(FEI number, if applicable)

4. 4/14/2021  
(Date first transacted business in Florida, if prior to registration)  
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 64 Crossing Lane #A  
(Street Address of Principal Office)

6. Same  
(Mailing Address)

SRB, FL 32459

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SECRETARY OF STATE  
TALLAHASSEE, FL

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Peter Pemberton  
Office Address: 64 Crossing Lane #A  
SRB, FL 32459  
(City)

Peter John Pemberton  
64 Crossing Lane Unit #A  
SRB, FL 32459  
Florida (Zip code)

Registered agent's acceptance:

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 application, 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.

Peter John Pemberton

(Registered agent's signature)

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

☒ Manager

Name:

Peter Pemberton

☐ Manager

Name:

☐ Member

Address:

64 Crossing Ln \*A

☐ Member

Address:

☐ Authorized

SRB, FL, 32459

☐ Authorized

Person

Person

☐ Other

☐ Other

☐ Other

☐ Other

☐ Manager

Name:

☐ Manager

Name:

☐ Member

Address:

☐ Member

Address:

☐ Authorized

☐ Authorized

Person

Person

☐ Other

☐ Other

☐ Other

☐ Other

☐ Manager

Name:

☐ Manager

Name:

☐ Member

Address:

☐ Member

Address:

☐ Authorized

☐ Authorized

Person

Person

☐ Other

☐ Other

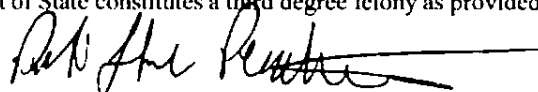
☐ Other

☐ Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a 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. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.



Signature of an authorized person

Peter John Pemberton

Typed or printed name of signee

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SECRETARY OF STATE  
TALLAHASSEE, FL

# STATE OF GEORGIA

## Secretary of State

Corporations Division

313 West Tower

2 Martin Luther King, Jr. Dr.

Atlanta, Georgia 30334-1530

### CERTIFICATE OF EXISTENCE

I, **Brad Raffensperger**, the Secretary of State of the State of Georgia, do hereby certify under the seal of my office that

**PNL Investments, LLC**  
a Domestic Limited Liability Company

was formed in the jurisdiction stated below or was authorized to transact business in Georgia on the below date. Said entity is in compliance with the applicable filing and annual registration provisions of Title 14 of the Official Code of Georgia Annotated and has not filed articles of dissolution, certificate of cancellation or any other similar document with the office of the Secretary of State.

This certificate relates only to the legal existence of the above-named entity as of the date issued. It does not certify whether or not a notice of intent to dissolve, an application for withdrawal, a statement of commencement of winding up or any other similar document has been filed or is pending with the Secretary of State.

This certificate is issued pursuant to Title 14 of the Official Code of Georgia Annotated and is prima-facie evidence that said entity is in existence or is authorized to transact business in this state.

Docket Number : 20938855  
Date Inc/Auth/Filed: 06/12/2018  
Jurisdiction : Georgia  
Print Date : 05/17/2021  
Form Number : 211



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State