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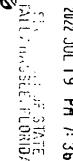
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		COVER LETTER		
	gistration Section rision of Corporations			
	Pinnacle North Properties, LLC			
SUBJECT:				
	Nar	ne of Limited Liability Company		
The enclosed Existence, ar	1 "Application by Foreign Limited Liability and check are submitted to register the above	Company for Authorization to Transact Business in Florida," Certificate of referenced foreign limited liability company to transact business in Florida.		
Please return	all correspondence concerning this matter	to the following:		
	Pascale Hapi			
		Name of Person		
		Firm/Company		
	4538 Old Frederick Road			
		Address		
	Baltimore, MD 21229			
	pascalehapi.consultant@gmail.com	City/State and Zip Code		
	E-mail address: (to b	e used for future annual report notification)		
For further in	formation concerning this matter, please ca	all:		
	scale Hapi	240 593-8517		
	Name of Contact Person	at () Area Code Daytime Telephone Number		
<u>Mail</u>	ling Address:	Street Address:		
	istration Section	Registration Section		
Div	ision of Corporations	Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Pleas	osed is a check for the following amount: se make check payable to: FLORIDA DEP 125.00 Filing Fee S130.00 Filing Fe	PARTMENT OF STATE e. &		



June 21, 2022

PASCALE HAPI 4538 OLD FREDERICK RD BALTIMORE, MD 21229

SUBJECT: PINNACLE NORTH PROPERTIES, LLC

Ref. Number: W22000084191

We have received your document for PINNACLE NORTH PROPERTIES, 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):

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.

Letter Number: 022A00013996

Tracy L Lemieux Regulatory Specialist II

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: PINNACLE NORTH PROPERTIES, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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 "LI.C.") MARYLAND 88-1739442 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) NO TRANSACTION YET (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 8027 LIONS CREST WAY 8027 LIONS CREST WAY (Street Address of Principal Office) (Mailing Address) GAITHERSBURG, MD 20879 GAITHERSBURG, MD 2083 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) LAURENCE CHIA Name: 7227 RONNIE GARDENS CT Office Address: **TAMPA** 33619 , Florida (City) (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. DocuSigned by: laurence (lua (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:		Title or Capacit	<u>iv:</u>	Name and Address:
⊡Manager	PETER KANGE Name:	∐Manager	Name:	
X Member	8027 LIONS CREST WAY Address:	UMember		
XAuthorized	GAITHERSBURG, MD 20879	[]Authorized		
Person		Person	 	
□Other		□Other		□Other
□Manager	Name:	□Manager	Name:	_
□Member	Address:	□Member	Address:	
□Authorized		□Authorized		
Person		Person		
□Other		□Other		□Other
□Manager	Name:	□Manager	Name:	
□Member	Address:	□Member	Address:	
□Authorized		H Authorized		
Person		Person		
Other	Other	_lOther	.	

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.



STATE OF MARYLAND Department of Assessments and Taxation

I, MICHAEL L. HIGGS OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF THE STATE OF MARYLAND, DO HEREBY CERTIFY THAT THE DEPARTMENT, BY LAWS OF THE STATE, IS THE CUSTODIAN OF THE RECORDS OF THIS STATE RELATING TO LIMITED LIABILITY COMPANIES. OR THE RIGHTS OF LIMITED LIABILITY COMPANIES. TO TRANSACT BUSINESS IN THIS STATE, AND THAT I AM THE PROPER OFFICER TO EXECUTE THIS CERTIFICATE.

I FURTHER CERTIFY THAT PINNACLE NORTH PROPERTIES, LLC (W22790737), REGISTERED MARCH 24, 2022, IS A LIMITED LIABILITY COMPANY EXISTING UNDER AND BY VIRTUE OF THE LAWS OF THE STATE OF MARYLAND, AND THAT THE LIMITED LIABILITY COMPANY IS AT THE TIME OF THIS CERTIFICATE IN GOOD STANDING TO TRANSACT BUSINESS.

IN WITNESS WHEREOF, I HAVE HEREUNTO SUBSCRIBED MY SIGNATURE AND AFFIXED THE SEAL OF THE STATE DEPARTMENT OF ASSESSMENTS AND TAXATION OF MARYLAND. AT BALTIMORE ON THIS JULY 07, 2022.

Michael L. Higgs

Director



301 West Presson Street. Baltimore, Maryland 21201 Telephone Baltimore Metro (410) 767-1340 / Outside Baltimore Metro (888) 246-5941 MRS (Maryland Relay Service) (800) 735-2258 TT/Voice

Online Certificate Authentication Code: BHWZFMYZ7UGwCaxpyXn_4A To verify the Authentication Code, visit http://dat.maryland.gov/verify