

TRANSMITTAL LETTER

Pg 1880008625

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

SUBJECT:

PINNACLE DEVELOPMENT CORPORATION

(Proposed corporate name - must include suffix)

500003562305--2

-01/22/01--01073--008

131.25 **87.50

Enclosed is an original and one(1) copy of the articles of incorporation and a check for :

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee
& Certificate

☐ \$122.50
Filing Fee
& Certified Copy

☒ \$131.25
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM:

J. CAPOZZI

Name (Printed or typed)

1510 HAMMOCK LANE

Address

PEMBROKE PINES FLA 33029

City, State & Zip

954 438-4985

Daytime Telephone number

FILED
01 JAN 22 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FL 32314

NOTE: Please provide the original and one copy of the articles.

10-4-01
JAC

ARTICLES OF INCORPORATION

The undersigned incorporator, for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopts the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be: PINNACLE DEVELOPMENT CORPORATION

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1510 HAMMOCK LANE PEMBROKE PINES FL 33026

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100 PAR VALUE \$1.00

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and Florida street address of the initial registered agent are:

JOHN CAPOZZI
1510 HAMMOCK LANE
PEMBROKE PINES FL

ARTICLE V INCORPORATOR

The name and address of the incorporator to these Articles of Incorporation are:

J. CAPOZZI
1510 HAMMOCK LANE
PEMBROKE PINES FL 33026


Signature/Incorporator

JAN 20 2001
Date

(An additional article must be added if an effective date is requested.)

Having been named as registered agent and to accept service of process for the above stated corporation 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


Signature/Registered Agent

JAN 20 2001
Date

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JAN 22 AM 8:26
TALLAHASSEE
SECRETARY OF STATE