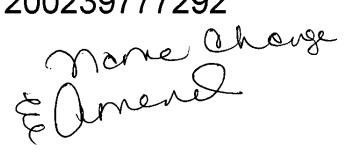
# P02000124517

(Re	equestor's Name)	
(Ad	ldress)	
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· (Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Ви	isiness Entity Nai	me)
(Do	ocument Number)	
Certified Copies	Certificate:	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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#### **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PINNACL	E CUSTOM H	HOMES, INC.
DOCUMENT NUMBER: P020001265	517	
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this man	tter to the following:	
PETER LEMUS	S	
PINNACLE CL		
5924 SW 42 TI	Firm/ Company	
· · · · · · · · · · · · · · · · · · ·	Address	
MIAMI, FL 331	55	
	City/ State and Zip Cod	e
PLEMUS14@GM	AIL.COM	
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
PETER LEMUS	at(305	345-7447
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee \$Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address  Amendment Section  Division of Corporations	Amend	Address Iment Section on of Corporations

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Taliahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 24, 2012

Peter Lemus Pinnacle Custom Homes, Inc. 5924 SW 42 Terr Miami, FL 33155

SUBJECT: PINNACLE CUSTOM HOMES, INC.

Ref. Number: P02000126517

We have received your document for PINNACLE CUSTOM HOMES, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records indicate the current name of the entity is as it appears on the enclosed computer printout. Please correct the name throughout the document.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The document number of the name conflict is L04000017683.

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) 245-6050.

Annette Ramsey Regulatory Specialist II

Letter Number: 012A00023821

CENEDA OCT-9 M 8:4

## Articles of Amendment

Articles of Incorporation

FILED

PINNACLE CUSTOM HOMES, INC.

2012 OCT -9 PM 12: 27

(Name of Corporation as currently filed with the Florida Dept. of State) (12 TALLAH

P0200126517

(Document Number of Corporation (if known)

PINNACLE CM, INC		
me must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or	tion," "company," or "incorporated" or the "Co". A professional corporation name mu. "P.A."
Enter new principal office address,	if applicable:	12595 SW 137 AVE
rincipal office address <u>MUST BE A S</u>		SUITE 205
		MIAMI, FL 33186
Enter new mailing address, if appl (Mailing address MAY BE A POST		SAME AS ABOVE
(muning nuiress MAT DE A POST	OFFICE BOX	
If amending the registered agent an	nd/or registered office a	ddress in Florida, enter the name of the
	nd/or registered office ac w registered office addr	ddress in Florida, enter the name of the
If amending the registered agent as	nd/or registered office a	ddress in Florida, enter the name of the ess:
If amending the registered agent an new registered agent and/or the ne	nd/or registered office addr w registered office addr N/A	ddress in Florida, enter the name of the ess:  street address)
If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	nd/or registered office as w registered office addr N/A (Florida	ess:
If amending the registered agent an new registered agent and/or the ne	nd/or registered office as w registered office addr N/A (Florida	street address)
If amending the registered agent an new registered agent and/or the new Name of New Registered Agent	nd/or registered office as w registered office addr N/A (Florida	street address) , Florida

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u> <u>Jol</u>	h <u>n Doe</u>	
X Remove	<u>V</u> <u>Mi</u>	ike Jones	
X Add	<u>SV</u> <u>Sa</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) X Change	VP_	PETER LEMUS	5924 SW 42 TERR
Add			MIAMI, FL 33155
Remove			
2) Change	<u>D</u>	ROSARIO LEMUS	531 NW 136 ST
Add			MIAMI, FL 331
X Remove	_	. = 0 / = = = =	
3) Change	<u>P</u>	LESLY DURET	11385 SW 109 RD
$X_{Add}$			#F
Remove			MIAMI, FL 33176
4) Change	VP_	CARLOS ARDAO	7280 SW 89 ST
$X_{Add}$			#D302
Remove			MIAMI, FL 33156
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
N/A	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N/A	

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"
by
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.
■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.
Dated_10/4/2012
Signature (By a director, president or other officer – if directors or officers have not been
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
PETER LEMUS
(Typed or printed name of person signing)
PRESIDENT
(Title of person signing)