

STATE OF GEORGIA  
Secretary of State  
Corporations Division  
313 West Tower  
2 Martin Luther King, Jr. Dr.  
Atlanta, Georgia 30334-1530

CERTIFICATE OF AUTHORITY

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

**Pinnacle Vehicle Management, LLC**  
a Foreign Limited Liability Company

has been duly formed under the laws of **Texas** and has filed an application meeting the requirements of Georgia law to transact business as a **Foreign Limited Liability Company** in this state.

WHEREFORE, by the authority vested in me as Secretary of State, the above **Foreign Limited Liability Company** is hereby granted, on **05/28/2019**, a certificate of authority to transact business in the State of Georgia as provided by Title 14 of the Official Code of Georgia Annotated. Attached hereto is a true and correct copy of said application.

WITNESS my hand and official seal in the City of Atlanta  
and the State of Georgia on **07/09/2019**.



*Brad Raffensperger*

Brad Raffensperger  
Secretary of State



Secretary of State

OFFICE OF SECRETARY OF STATE  
CORPORATIONS DIVISION  
2 Martin Luther King Jr. Dr. SE  
Suite 313 West Tower  
Atlanta, Georgia 30334  
(404) 656-2817  
sos.georgia.gov/corporations

2019 JUN 21 PM 2:35

APPLICATION FOR CERTIFICATE OF AUTHORITY  
FOR FOREIGN LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
CORPORATIONS DIVISION

**IMPORTANT:** Please provide the entity's primary email address when completing this form.

Primary Email Address: pinnacleevans@yahoo.com

NOTICE TO APPLICANT: PRINT PLAINLY OR TYPE REMAINDER OF THIS FORM

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            |                                    |                |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|------------------------------------|----------------|
| 1. Pinnacle Vehicle Management LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                    |                |
| Name of Limited Liability Company                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                            | Name Reservation Number (Optional) |                |
| 06/11/19                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                            |                                    |                |
| Date business commenced (or proposed) in Georgia (NOTE: If date provided here is more than 30 days prior to the effective date of this application, a \$600 penalty plus fees must be paid. Penalty is statutory and cannot be waived by Secretary of State.)                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                            |                                    |                |
| 2. John Gibson                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                            |                                    |                |
| Name of Filing Person                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            |                                    |                |
| 6000 Riverside Dr                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                            | Irving                             | Tx 75039       |
| Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                            | City                               | State Zip Code |
| pinnacleevans@yahoo.com                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                            | 972 803-4477                       |                |
| Filer's Email Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            | Telephone Number                   |                |
| 3. Pinnacle Vehicle Management LLC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                    |                |
| Name of Limited Liability Company in State or Country of Formation                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                    |                |
| Texas                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | 10/04/15                                   | 3.5 Yrs                            |                |
| Jurisdiction (Home State or Country)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Date of Formation in Home State or Country | Period of Duration                 |                |
| 4. 130 Carnes Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            |                                    |                |
| Address of Principal Place of Business                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                            | Fayetteville                       | Ga 30214       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            | City                               | State Zip Code |
| 5. Tyler Loveless                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                            |                                    |                |
| Name of Registered Agent in Georgia                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            | tylerloveless47@gmail.com          |                |
| 130 Carnes Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            | Registered Agent's Email Address   |                |
| Registered Office Street Address in Georgia (post office box or mail drop not acceptable for registered office address)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                            |                                    |                |
| Fayetteville                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Fayette                                    | GA                                 | 30214          |
| City                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | County                                     | State                              | Zip Code       |
| 6. John Gibson 6000 Riverside Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            |                                    |                |
| Manager's Name & Address (person with substantial responsibility for managing LLC's business activities)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                            | Irving                             | Tx 75039       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            | City                               | State Zip Code |
| 7. 130 Carnes Drive                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                            |                                    |                |
| Address Where Limited Liability Company's Records Are Maintained                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            | Fayetteville                       | Ga 30214       |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            | City                               | State Zip Code |
| 8. Effective Date: (Choose one) <input checked="" type="checkbox"/> Upon filing <input type="checkbox"/> Delayed effective date and/or time: _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                    |                |
| (A delayed effective date must be within 90 days of the filing date.)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            |                                    |                |
| 9. NOTICE: Mail the following items to the Secretary of State at the above address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                            |                                    |                |
| (1) This application;                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                            |                                    |                |
| (2) The filing fee of \$225.00 payable to "Secretary of State." Filing fees are non-refundable.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            |                                    |                |
| This application is signed by a person duly authorized to sign such instruments by the laws of the jurisdiction under which the foreign limited liability company is organized. The foreign limited liability company undertakes to keep its records at the address shown in #7 above until its registration in Georgia is canceled or withdrawn. The foreign limited liability company, in accordance with Title 14 of the Official Code of Georgia Annotated, appoints the Secretary of State as agent for service of process if no agent has been appointed in Georgia or, if appointed, the agent's authority has been revoked or the agent cannot be found or served by the exercise of reasonable diligence. |                                            |                                    |                |
| Signature of Authorized Person                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                            | 06/11/19                           |                |
| Timothy A Carter                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                            | Date                               |                |
| Print Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                            | President                          |                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                            | Title                              |                |