



**WASHINGTON**  
**Secretary of State**  
Corporations & Charities Division

Filed  
Secretary of State  
State of Washington  
Date Filed: 08/30/2022  
Effective Date: 08/30/2022  
UBI #: 604 800 310

## Annual Report

### BUSINESS INFORMATION

---

Business Name:

**FAC PINNACLE, LLC**

UBI Number:

**604 800 310**

Business Type:

**WA LIMITED LIABILITY COMPANY**

Business Status:

**ACTIVE**

Principal Office Street Address:

**3044 25TH AVE W, SEATTLE, WA, 98199-2814, UNITED STATES**

Principal Office Mailing Address:

Expiration Date:

**08/31/2023**

Jurisdiction:

**UNITED STATES, WASHINGTON**

Formation/Registration Date:

**08/20/2021**

Period of Duration:

**PERPETUAL**

Inactive Date:

Nature of Business:

**REAL PROPERTY INVESTMENT**

**REGISTERED AGENT** [RCW 23.95.410](#)

---

Registered Agent Name	Street Address	Mailing Address
PAUL DAVIS	717 W SPRAGUE AVE STE 1600, SPOKANE, WA, 99201-3923, UNITED STATES	717 W SPRAGUE AVE STE 1600, SPOKANE, WA, 99201-3923, UNITED STATES

### PRINCIPAL OFFICE

---

Phone:

Email:

**KEVIN@FOURTHAVECAPITAL.COM**

Street Address:

3044 25TH AVE W, SEATTLE, WA, 98199-2814, USA

Mailing Address:

## GOVERNORS

Title	Type	Entity Name	First Name	Last Name
GOVERNOR	ENTITY	FAC MANAGEMENT, LLC		

## NATURE OF BUSINESS

REAL PROPERTY INVESTMENT

## EFFECTIVE DATE

Effective Date:

08/30/2022

## CONTROLLING INTEREST

1. Does this entity own (hold title) real property in Washington, such as land or buildings, including leasehold improvements?

YES

2. In the **past 12 months**, has there been a transfer of at least 16-2/3 percent of the ownership, stock, or other financial interest in the entity?

NO

a. If "Yes", in the **past 36 months**, has there been a transfer of controlling interest (50 percent or greater) of the ownership, stock, or other financial interest in the entity?

NO

3. If you answered "Yes" to question 2a, has a controlling interest transfer return been filed with the Department of Revenue?

NO

You **must** submit a Controlling Interest Transfer Return form if you answered "yes" to questions 1 and 2a.

Failure to report a Controlling Interest Transfer is subject to penalty provisions of [RCW 82.45.220](#).

For more information on **Controlling Interest**, visit [www.dor.wa.gov/REET](http://www.dor.wa.gov/REET).

## RETURN ADDRESS FOR THIS FILING

Attention:

DAWN BUTCHER

Email:

DBUTCHER@LUKINS.COM

Address:

717 W SPRAGUE AVE STE 1600, SPOKANE, WA, 99201-3923, USA

## UPLOAD ADDITIONAL DOCUMENTS

Do you have additional documents to upload? No

## EMAIL OPT-IN

☐ By checking this box, I hereby opt into receiving all notifications from the Secretary of State for this entity via email only. I

acknowledge that I will no longer receive paper notifications.

## AUTHORIZED PERSON

---

☒ I am an authorized person.

Person Type:

**INDIVIDUAL**

First Name:

**DAWN**

Last Name:

**BUTCHER**

Title:

**AUTHORIZED AGENT**

☒ This document is hereby executed under penalty of law and is to the best of my knowledge, true and correct.