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2010 SEP ZU TRIBER STATE

C. LEMMS
SEP 2 1 2010
EXAMINER

COVER LETTER

TO: Registration S Division of Co			· ·			
subject: To	Shelf Plati	num Group				
•	Name of Limit	ed Liability Company				
The enclosed Articles o	f Organization and fee(s) are	submitted for filing.				
Please return all corresp	ondence concerning this mat	ter to the following:				
Lar	ry Jolly,	Name of Person				
Firm/Company						
312	Foxridge					
	<u> </u>	Address				
Ora	- Foxridge inge Parlc, F	- <u>L</u> 32065				
	Cii	y/state and Zip Code				
E-mail address: (to be used for future annual report notification)						
For further information	concerning this matter, please	e call:				
Larry Joname	olly, Jr.	at (904) 382 - Area Code & Daytime Tele	4982 phone Number			
Enclosed is a check for	or the following amount:					
\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	Mailing Address Registration Section	Street/Courier Address Registration Section				

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Top Shelf Platinum Group LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:
Principal Office Address: Mailing Address:
1670 Wells Road Suite 9 k 10 Orgnze Park, FL 32073 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: Larry Jolly, Jr. Name 312 Fox ridge Rd. Florida street address (P.O. Box NOT acceptable) Orange Perk FL 32065 City, State, and Zip

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 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 as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

FILED

	ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:			2010 SEP 20	PM & 58
•	<u>Title:</u> "MGR" = Manag "MGRM" = Man	er	Name and Address:	TALLANAUSE	TE FLUITEA
	MGR		Larry Jolly, Jr. 312 Foxildae Rd. Orange Park, FL 32065	2	
		_			
ARTIC	(Use attachment in LE V: Effective of fective date is list days after the days	date, if other than the dat	e of filing: $\frac{9/14/10}{2}$ excific and cannot be more than five	(OPTIONAL e business days	L) prior
;	<u>REQUIRED</u> SIC	1	Jelly		
		(In accordance with section of this document constitute that the facts stated herein	an authorized representative of a member 608.408(3), Florida Statutes, the executions an affirmation under the penalties of perjuare true.)	n	
	Filing Fees:	(1		
	\$125.00 Filing F of Regis \$ 30.00 Certified	ee for Articles of Organiza stered Agent d Copy (Optional) ate of Status (Optional)	tion and Designation		

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Page 2 of 2