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COVER LETTER

TO: New Filing Section Division of Corporations	
SUBJECT: PLATINUM LEASING SERVICES, INC.	
Name of corporation - must include suffix	
Dear Sir or Madam:	
The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.	
Please return all correspondence concerning this matter to the following:	
Janice Null for Incorp Services, Inc.	
Name of Person	
Incorp Services, Inc.	
Firm/Company	
2360 Corporate Circle, Suite 400	
Address	
Henderson, NV 89074-7722	
City/State and Zip code	
mkruger@platinum-corp.com	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Janice Null for Incorp Services, Inc. at (702) 866-2500 x 6505	
Name of Person Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 MAILING ADDRESS: New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	SECRETARY OF STAIL
Enclosed is a check for the following amount:	·
\$70.00 Filing Fee \$\ \tag{S78.75 Filing Fee & Gertificate of Status} \] \$78.75 Filing Fee & Gertified Cop Certificate of Status & Certified Copy	٤

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

··	EASING SERVICES, INC.				_
	rporation; must include "INCORPORATI rp," "Inc," "Co," or "Corp.")	ED,'	' "COMPANY," "CORPORATION,"		
(If name unavaila	ble in Florida, enter alternate corporate na	me	adopted for the purpose of transacting business in	Florida)	•
2. Illinois		3.	30-2433248		
- · -	inder the law of which it is incorporated)		(FEI number, if applicable)		-
4. 03/17/2005		5.	Perpetual		
	of incorporation)		(Duration: Year corp. will cease to exist or "per	petual")	-
6. Upon Filing					
	,		Florida, if prior to registration)		•
	(SEE SECTIONS 607.1501 & 60	7.15	02, F.S., to determine penalty liability)		
7. 324 State Ave	e, Hampton, IL 61256				_
	(Principal office	addı	ress)		_
	(Current mailing	add.	eans)	 	-
	(Current maning	auu	(655)		
g any legal act	ivity			2011	M
*· <u> </u>	of corporation authorized in home state of	r co	untry to be carried out in state of Florida)	JAN -5	
9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)		25	윾.		
			,		25.
Name:	Incorp Services, Inc.			PX	PG.
Office Address:	17888 67th Court North			ነት ነት	<u> </u>
	Loxahatchee		, Florida <u>33470</u>	Ę	2
	(City)		(Zip code)		

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

A. DIRECTORS	DIVISION OF CORPURATION
Chairman:	2011 JAN - 5 PM 4: 44
Address:	
Vice Chairman:	
Address:	
Director:	
Address:	
Director:	
Address:	
B. OFFICERS	
President: JOHN D FERRELL	
Address: 317 8TH AVE HAMPTON 61256	
Vice President:	
Address:	
<u> </u>	
Secretary:	
Address:	
Treasurer:	
Address:	
NOTE: If necessary you may at adh an addendum to the application listing additional addi	onal officers and/or directors.
13.	
(Signature of Director or Officer listed in number 12 of the a	pplication)
14. John D. Ferrell, President (Typed or printed name and capacity of person signing app	lication)
(1) page of printed finite und explority of person signing upp	

File Number

6411-321-6

EILED SECRETARY OF STATE DIVISION OF CORPORATION



To all to whom these Presents Shall Come, Greeting:

I, Jesse White, Secretary of State of the State of Illinois, do hereby certify that

PLATINUM LEASING SERVICES, INC., A DOMESTIC CORPORATION, INCORPORATED UNDER THE LAWS OF THIS STATE ON MARCH 17, 2005, APPEARS TO HAVE COMPLIED WITH ALL THE PROVISIONS OF THE BUSINESS CORPORATION ACT OF THIS STATE RELATING TO THE PAYMENT OF FRANCHISE TAXES, AND AS OF THIS DATE, IS IN GOOD STANDING AS A DOMESTIC CORPORATION IN THE STATE OF ILLINOIS.



Authentication #: 1036301794

Authenticate at: http://www.cyberdriveillinois.com

In Testimony Whereof, I hereto set

my hand and cause to be affixed the Great Seal of the State of Illinois, this 29TH

day of

DECEMBER

A.D.

2010

Desse White

SECRETARY OF STATE