

# 01000009012

ACCOUNT NO. : 072100000032

REFERENCE: 294946

AUTHORIZATION :

COST LIMIT :

ORDER DATE: November 2, 2001

ORDER TIME: 9:46 AM

ORDER NO. : 294946-020

CUSTOMER NO: 7122935

CUSTOMER: Ms. Robin Gordon

Law Offices Of Michael Lapat

Suite 311

3300 University Drive Coral Springs, FL 33065

## DOMESTIC FILING

NAME:

PLATINUM CAPITAL ASSET

MANAGEMENT, LLC

### EFFECTIVE DATE:

500004679046--9: <u>1</u>

XXX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### **ARTICLE I - Name:**

The name of the Limited Liability Company is:

PLATINUM CAPTIAL ASSET MANAGEMENT, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

5301 N. FEDERAL HIGHWAY, SUITE 150, BOCA RATON, FLORIDA 33487

# ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Corporation S	Service C	ompany
Nam	ie .	•
1201 На	ys Street	<u></u>
Florida street address (P.O	. Box <u>NOT</u> :	acceptable)
Tallahassee	FL	32301
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.

Corporation Service Company

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution

of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

LAURA R. DUNLAP

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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## LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of PLATINUM CAPITAL ASSET MANAGEMENT, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 7 day of November, 700/

Signature

Print Name of Signer

WITNESS:

Print Name of Witness

WITNESS:

Stonanire

Print Name of Witness

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FL LLC D-:LIMITED POWER OF ATTORNEY 04/00 (FLLLCATT)