

10/20/03 16:23 FAX 813 298 296

FOWLER WHITE TAMPA

APPROVED
AND
FILED

002/002

FAX AND DTG NO. H03000300296
Page 0

03 OCT 20 AM 9:34

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
TALLAHASSEE, FLORIDALIMITED LIABILITY
COMPANY
REINSTATEMENTFLORIDA DEPARTMENT OF STATE
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L02000005641

1. Limited Liability Company's Name

PLATINUM SERVICES, LLC

REINSTATEMENT

2003

2. Principal Office Address

703 Newport Avenue

Suite, Apt. #, etc.

3. Mailing Office Address

100 S. Ashley Drive

Suite, Apt. #, etc.

Suite 1650 (c/o J. Scott Robey)

City & State

Tampa, FL

City & State

Tampa, FL

Zip

33606

Country

USA

Zip

33602

Country

USA

4. State/Country of Formation

Florida

5. Date Organized or Qualified
To Do Business in Florida

03/08/2002

6. FEI Number

NONE

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Fowler White Boggs Banker, P.A. ATTN: Hunter Brownlee

Street Address (P.O. Box Number is Not Acceptable)

501 E. Kennedy Blvd.

Suite, Apt. #, Etc.

Suite 1700

City

Tampa

State

FL

Zip Code

33602

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 606, F.S.

Signature of
Registered Agent

REGISTERED AGENT MUST SIGN

Date

10-9-03

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
MGRM	Greg Balasco	703 Newport Avenue	Tampa, FL 33606

11. I certify that I am managing member/manager of the registered or trustee empowered to execute this application as provided for in chapter 606, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 606.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

Date

10-9-03

Daytime Phone#

813 246 2640

Typed or printed name of signing Managing Member/Manager

Greg Balasco

FAX AUDIT NO. H03000300296 3

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

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To:

Division of Corporations
Fax Number : (850) 205-0383

From: Deborah K. Miller

Account Name : FOWLER, WHITE 2
Account Number : Y19990000148
Phone : (813) 228-7411
Fax Number : (813) 228-9401

(HJB - 1014793)

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DIVISION OF CORPORATION

LIMITED LIABILITY REINSTATEMENT

PLATINUM SERVICES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
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