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W04-51736
OK

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PLATINUM GROUP, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RON ACKERMAN
(Name of Person)

(Firm/Company)

5335 EHRlich RD.
(Address)

TAMPA, FL 33625
(City/State and Zip Code)

For further information concerning this matter, please call:

RON ACKERMAN at (813) 961-7321
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

PLATINUM GROUP, LLC

ARTICLE II - Address:

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

Principal Office Address:

5335 EHRlich RD.
TAMPA, FL 33625

Mailing Address:

5335 EHRlich RD.
TAMPA, FL 33625

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

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

RON ACKERMAN

Name

5335 EHRlich RD.

Florida street address (P.O. Box **NOT** acceptable)

TAMPA FLORIDA 33625

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, Florida Statutes..

Ron Ackerman

Registered Agent's Signature

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01/02/08 09:43:14
TAMPA, FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

WARREN L. BURCHARDT
4825 SCOTT ROAD
LUTZ, FL 33558

MGR

RON ACKERMAN
5335 EHRlich RD.
TAMPA, FL 33625

MGRM

SUSAN A. BURCHARDT
4825 SCOTT ROAD
LUTZ, FL 33558

MGRM

TINA ACKERMAN
5335 EHRlich RD.
TAMPA, FL 33625

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Warren L. Burchardt

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.)

WARREN L. BURCHARDT

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)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 JUL - 9 09 AM '09

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