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| (Requestor's Name) | | | |
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| (City/State/Zip/Phone # |) | | |
| | MAIL | | |
| (Business Entity Name) | | | |
| (Document Number) | | | |
| Certified Copies Certificates of Status | | | |
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| Special Instructions to Fling Officer: | K | | |
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Office Use Only





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| CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222 Platinum Flashback Entertainment Group, LLC | TALL MHASSEE FLORE |
|--|--|
| | Art of Inc. File LTD Partnership File Foreign Corp. File Foreign Corp. File Fictitious Name File Trade/Service Mark Merger File |
| | Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status |
| Signature Requested by: Name Lofto fo7 4:30 Time | Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search Fictitious Owner Search Vehicle Search Driving Record UCC 1 or 3 File UCC 11 Search |
| Walk-In Will Pick Up | UCC 11 Retrieval |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Platinum Flashback Entertainment Group, LLC

ARTICLE II - Address;

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

8136 Fairways Circle, Ocala, Florida 34472

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

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

Fredrick I. Kirkirt

FILED PHIZ: 03

Name 8136 Fairways Circle

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

Ocala 34472 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.

Registered Agent's Signature

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.)

Alvin Strachen

Typed or printed name of signee

Filing Fees:

5100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30,00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)