12000008396

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REFERENCE : 372532 7866162

AUTHORIZATION

COST LIMIT

ORDER DATE: November 11, 2014

ORDER TIME : 3:17 PM

ORDER NO. : 372532-010

CUSTOMER NO: 7866162

DOMESTIC FILINGS

NAME: PLATINUM H. G. LLC

XX AR	RTICLES OF	DISSOLUTION	ABASS
PLEASE R	ETURN THE	FOLLOWING AS PROOF OF FI	: <u>n</u> ~<
	CERTIFIED PLAIN STAM CERTIFICAT		SEAT TO SEAT T
CONTACT	PERSON:	Courtney Williams - EXT#	62935

EXAMINER'S INITIALS:

COVER LETTER

Division of Corporations			
SUBJECT: PLATINUM H. G. LLC			
(Name of Limited Liability Company)			
The enclosed Articles of Dissolution and fee(s) are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
BILL SIVETER			
(Name of Person)			
PLATINUM			
(Firm/Company)			
4911 EAST STREET RU			
FEASIERVILLE PA 19053			
(City/State and Zip Code)	Pu	20	
		F	
For further information concerning this matter, please call:		35	ì
BILL SIVE VIR at 267, 971 8008	ASSE	2014 N/20V 13	ļ.,
(Name of Person) (Area Code & Daytime Telephone Number) 목유		§ 071

MAILING ADDRESS:

\$25.00 Filing Fee and Certificate of Dissolution

Enclosed is a check for the following amount:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

\$55.00 Filing Fee, Certificate of Dissolution & Certified Copy (additional copy is enclosed)

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

		ARTICLES OF DISSOLUTION			
		FOR A LIMITED LIABILITY COMPANY	~4	~ >	
	he name of a limited liabili PLATINUM H. G. LLC	ty company is	SEERET	2014 JEV	enegation.
2. T	he Articles of Organization	were filed on 01/18/2012 and assigned	985171 885171	-3 - 强	To the second
de	ocument number L120000	008396		\$ \$	
). T	he delayed effective date th (effective c	ne dissolution if not effective on the date of filing:	for filing)	U T	
	description of occurrence to 5.0707, Florida Statutes, (cot in business	that resulted in the limited liability company's dissolution pursuant topy 605.0707 on back cover letter).	at to section		
					
	there are no members, ente	er the name and address of the person appointed to wind up the co	mpany's		
. Si isted	gnature of an authorized pe l above to wind up the comp	erson or if there are no members, the signature of the person appoinany's activities and affairs:	nted and		
	Signature	Bill Siverter Printed Name			
~	_p- Dignature	I fillied Name			

FILING FEE: \$25.00