

L13000108285

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

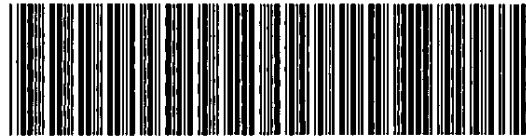
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W13-40111

Office Use Only



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07/15/13--01042--001 **160.00

EFFECTIVE DATE 07-16-13

FILED
2013 JUL 15 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUL 31 2013

EXAMINER

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Platinum Auto Sales, 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:

Paulo A. Rodrigues

Name of Person

Platinum Auto Sales LLC

Firm/Company

23 Hardgrove Grade Unit- E

Address

Palm Coast, FL 32137

City/State and Zip Code

Barbosa_Alice@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Paulo Rodrigues

Name of Person

at (**386**) **627-0668**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

2013 JUL 15 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Platinum Auto Sales, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

23 Hardgrove Grade Unit, E

Palm Coast, FL 32137

Mailing Address:

3 Hardgrove Grade Unit E

Palm Coast, FL 32137

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Alice Barbosa

Name

8 Lincoln Place

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

Palm Coast

FL

32137

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 (REQUIRED)

(CONTINUED)

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

Paulo A. Rodrigues

22 Firethorn Lane

Palm Coast, FL 32137

MGR

Adelino Rosa De Sousa

4 Ranwood Lane

Palm Coast, FL 32164

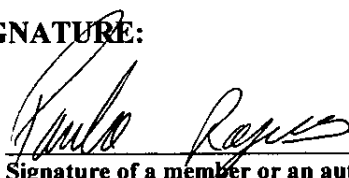
(Use attachment if necessary)

2013 JUL 15 PM 4:00
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA

ARTICLE V: Effective date, if other than the date of filing: 7/16/2013 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Paulo A. Rodrigues

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 16, 2013

PAULO A. RODRIGUES
23 HARDGROVE GRADE
UNIT E
PALM COAST, FL 32137

SUBJECT: PLATINUM AUTO SALES, LLC
Ref. Number: W13000040111

FILED
2013 JUL 15 PM 4:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for PLATINUM AUTO SALES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on July 15, 2013. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 413A00017336