

LI 5000 0 35527

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

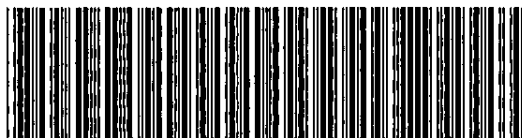
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900268969119

900268969119
02/03/15--01031--006 **130.00

FILED
15 FEB 20 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers FEB 26 2015

2744



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 11, 2015

NATALIE SOTOMAYOR
27251 SR 54 SUITE 203
WESLEY CHAPEL, FL 33544

SUBJECT: PLATINUM REALTY & INVESTMENTS LLC
Ref. Number: W15000010046

We have received your document for PLATINUM REALTY & INVESTMENTS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 015A00002839

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Platinum Realty & Investments, 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:

Natalie Solomayor
Name of Person

Platinum Realty & Investments, LLC
Firm/Company

27251 SR 54, Suite 203
Address

Wesley Chapel, FL 33544
City/State and Zip Code

platinumrealtyfl@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Natalie Solomayor at (813) 714-9040
Name of Person 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Platinum Real Estate Investments, LLC

Platinum Realty & Investments, 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:

Mailing Address:

27251 SR 54, Suite 203
Wesley Chapel, FL 33544

27251 SR 54, Suite 203
Wesley Chapel, FL 33544

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:

Natalie Salomayor
Name

27251 SR 54, Suite 203
Florida street address (P.O. Box **NOT** acceptable)

Wesley Chapel FL 33544
City 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 603, F.S.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
15 FEB 20 AM 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Natalie Sotomayor
27251 SR 54, Suite 203
Wesley Chapel, FL 33544

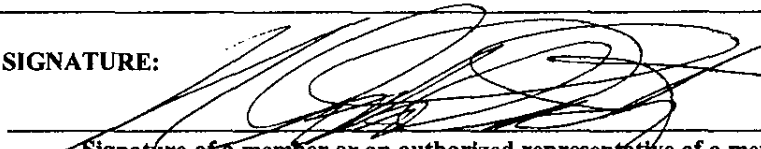
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Natalie Sotomayor

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)

FILED
15 FEB 20 AM 8:55
DEPARTMENT OF STATE
HALLWAY, FLORIDA