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| (Requestor's Name) | |
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| PICK-UP WAIT MAIL | |
| | |
| (Business Entity Name) | |
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| (Document Number) | _ |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
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COVER LETTER

| | stration Section ion of Corporations | | |
|--------------------|---|--|--|
| SUBJECT: _ | Platinum Execuiname of Li | Lue Car Services, mited Liability Company | uc |
| The enclosed A | Articles of Organization and fee(s) a | re submitted for filing. | |
| Please return a | II correspondence concerning this m | natter to the following: | |
| _ | _ | Name of Person Security (3/ Serim/Company) | Ervice, uc |
| | 1400 Village | Square Blud S | He 3-340 " |
| For further in for | E-mail address: (to be used | City/State and Zip Code of Combos of for future annual report notifications could be controlled to the control of the control | |
| For further infor | mation concerning this matter, pleas | se can: | |
| £ | Name of Person A | Area Code Daytime Telephone | Number |
| Enclosed is a c | heck for the following amount: | | |
| \$125.00 Filing | Fee \$130.00 Filing Fee & Certificate of Status | Certified Copy (additional copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address | Street Address | |
| | New Filing Section Division of Corporations | New Filing Section Division of Corporation | one |
| | P.O. Box 6327 | Clifton Building | JII 3 |
| | Tallahassee, FL 32314 | 2661 Executive Cente | r Circle |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| Ā | RT | IC. | LE | I- | Na | me |
|---|----|-----|----|----|----|----|
|---|----|-----|----|----|----|----|

The name of the Limited Liability Company is:

Platinum Executive Car Services (IC (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:

ARTICLE III - Registered Agent, Registered Office, & Registered Agent. You must designate an individual another business entity with an active Florida registered agent are:

Harry D. Savage
Name

3883 Dorovan Drue Att A

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

Tallahasse Fl. 32300

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 605, F.S..

egistered-Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

| Title: "AMBR" = Authorized Member | Name and Address: |
|--|--|
| "MGB"=MBE" | HARRY DSAVAGE 1400 Uillage Square Blud Ste 3-340 Tallehossee, Fl. 32312 |
| | |
| | SECULIA SECULI |
| - | 29 PH |
| | - |
| (Use attachment if necessary) | |
| RTICLE V: Effective date, if other than t f an effective date is listed, the date must be date of filing.) lote: If the date inserted in this block does | he date of filing: April 01, 2016 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 days after es not méet the applicable statutory filing requirements, this date will not be listed |
| RTICLE V: Effective date, if other than t f an effective date is listed, the date mus the date of filing.) | he date of filing: April 01, 2016 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 days after es not méet the applicable statutory filing requirements, this date will not be listed a |
| RTICLE V: Effective date, if other than the fan effective date is listed, the date must be date of filing.) Note: If the date inserted in this block does the document's effective date on the Department. | he date of filing: April 01, 2016 (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 days afte es not méet the applicable statutory filing requirements, this date will not be listed |
| RTICLE V: Effective date, if other than the fan effective date is listed, the date must be date of filing.) Note: If the date inserted in this block do not document's effective date on the Department of the De | he date of filing: April 01, 2016. (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 days after es not méet the applicable statutory filing requirements, this date will not be listed |

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)