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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Enlity Name)
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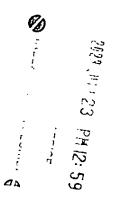


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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 - Tallahassee, Florida 32301 (850) 224-8870 - 1-800-342-8062 - Fax (850) 222-1222

· · · · · · · · · · · · · · · · · · ·	
Platinum Realty Investments, LLC	
Please Debit FCA000000003 For: 125	
Thank you Seth Neeley	
1451	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. 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
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Jen	Fictitious Owner Search
Signature	Vehicle Search
	Driving Record
Requested by: SETH 06/23/2023	UCC 1 or 3 File
	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier
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COVER LETTER

	New Filing Sec Division of Co					
SUBJECT	Platinum R	ealty Investmen	nts, LLC			
SUBJECT: Name of Limited Liability Company						
The enclo	sed Articles of	Organization a	nd fee(s) are	e submitted	l for filing.	
Please ret	urn all correspo	ondence concer	ning this ma	itter to the	following:	
	Alexander B	. Rotbart				
				Name of	Person	
	The Rotbart	Law Group, PA	ı			
				Firm/Co	ompany	
	117 East Boo	a Raton Road				
				Addr	ress	
	Boca Raton,	F1, 33432				
	office.franke@	gmail.com	С	ity/State an	d Zip Code	
			(to be used	for future a	unnual report notificat	ion)
For further	information co	ncerning this m	atter, please	e call:		
	Alexander B.	Rotbart	56		922-3217	
	Nam	e of Person			Daytime Telephon	
Enclosed i	s a check for th	ne following an	ount:			
■\$125.00	O Filing Fee	□\$130.00 Fi Certificate o		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address ling Section			Street Address New Filing Section Di	vision

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
Platinum Realty Investments, LLC					
(Must contain the words "Limited	d Liability Compan	y, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limit	ed Liability Company is:			
Principal Office Address:		Mailing Address:			
2150 Sans Souci Blvd.	21	50 Sans Souci Blvd.			
Apt 902	<u></u>	ot 902			
North Miami, FL 33181	No	North Miami, FL 33181			
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its ow another business entity with an active Florida registrat The name and the Florida street address of the register	n Registered Agen ion.)				
Pascal Franke					
· · · · · · · · · · · · · · · · · · ·	Name	· · · · · · · · · · · · · · · · · · ·			
2150 Sans Souci Blvd. Apt 902					
Florida street addre	ess (P.O. Box <u>NOT</u>	acceptable)			
North Miami	FL	33181			
City	State	Zip			
Having bean named as registered agent and to account see	nica of propage for	by about stated limited lightlity commons a			

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)



ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Pascal Franke 2150 Sans Souci Blvd. Apt 902
	North Miami, Fl. 33181
(Use attachment if necessary)	
(Ose attachment if necessary)	
If an effective date is listed, the date must	te date of filing:
	s not meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Depar ARTICLE VI: Other provisions, if any.	iment of State's records.
REQUIRED SIGNATURE:	h-ul
/	19 CE
This document is	f a member or an authorized representative of a member, executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
Pascal Fran	ke - Manager
	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)

