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2004 MAY 19 P 2:21

SECRETARY OF STATE  
TALLAHASSEE



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05/19/04--01015--008 \*\*155.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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THE • PLATINUM



CAPITAL • FINANCIAL • GROUP

FILED

2004 MAY 19 P 2:21

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

April 18, 2004

Florida Department of State  
Registration Section  
Division of Corporations  
409 East Gaines Street  
Tallahassee, FL 32399

Enclosed is application for Platinum Capital Financial Group, LLC, a Minnesota Limited Liability Company, and requesting authorization to transact business in the State of Florida.

Also enclosed is check #5039 for the amount of \$155.00; for payment of the following fees:

\$100.00	Filing Fee for Application
\$25.00	Designation of Registered Agent
\$30.00	Certified Copy

Please call me at 612.746.1664 with any questions.

Sincerely,

A handwritten signature in black ink, appearing to be "S E Kostrzewa", written over a horizontal line.

Shawn E. Kostrzewa  
Platinum Capital Financial Group, LLC  
333 Washington Avenue- North  
Suite 206, Union Plaza  
Minneapolis, MN 55401

Phone: 612.746.1664  
Fax: 612.677.3824

**FILED**  
2004 MAY 19 P 2:21  
OFFICE OF THE CLERK OF THE SUPREME COURT  
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO  
TRANSACTION BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACTION BUSINESS IN THE STATE OF FLORIDA:

1. Platinum Capital Financial Group, LLC  
(Name of foreign limited liability company)
2. Minnesota  
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 65-1181207  
(FEI number, if applicable)
4. March 19, 2003  
(Date of Organization)
5. Perpetual  
(Duration: Year limited liability company will cease to exist or "perpetual")
6. May 01, 2004  
(Date first transacted business in Florida. (See sections 608.501, 608.502, and 817.155, F.S.))
7. 333 Washington Avenue- North, Suite 206  
Minneapolis, MN 55401  
(Street address of principal office)
8. If limited liability company is a manager-managed company, check here ☐
9. The name and usual business addresses of the managing members or managers are as follows:  
Tony Bianchi 333 Washington Avenue- North, Suite 206, Minneapolis, MN 55401  
Jamie Nagel 333 Washington Avenue- North, Suite 206, Minneapolis, MN 55401  
Jason Birt 333 Washington Avenue- North, Suite 206, Minneapolis, MN 55401
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)
11. Nature of business or purposes to be conducted or promoted in Florida: Arranging financing on commercial real estate, financing for business acquisitions, 1st/ 2nd residential mortgages

Shawn E. Kostrzewa  
Signature of a member or an authorized representative of a member.  
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

FILED

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

2024 MAY 19 P 2:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES,  
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING  
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE  
STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Platinum Capital Financial Group, LLC

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

Geory Stivers

(Name)

564 Crystal Lake Drive

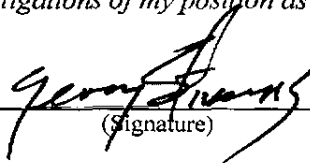
Florida street address (P.O. Box **NOT** ACCEPTABLE)

Melbourne

FL 32940

(City/State/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.*



(Signature)

\$ 100.00	Filing Fee for Application
\$ 25.00	Designation of Registered Agent
\$ 30.00	Certified Copy (optional)
\$ 5.00	Certificate of Status (optional)

State of Minnesota

**SECRETARY OF STATE**

Certificate of Organization

I, Mary Kiffmeyer, Secretary of State of Minnesota, do certify that: Articles of Organization, duly signed, have been filed on this date in the Office of the Secretary of State, for the organization of the following limited liability company, under an<sup>d</sup> in accordance with the provisions of the chapter of Minnesota Statutes listed below.

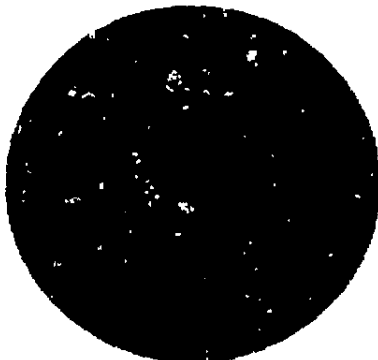
This limited liability company is now legally organized under the laws of Minnesota.

Name: Platinum Capital Financial Group, LLC

Charter Number: 39595-LLC

Chapter Formed Under: 322B

This certificate has been issued on 03/19/2003.



*Mary Kiffmeyer*  
Secretary of State.



LHC-OR

**MINNESOTA SECRETARY OF STATE**  
**ARTICLES OF ORGANIZATION FOR**  
**A LIMITED LIABILITY COMPANY**  
**MINNESOTA STATUTES CHAPTER 322B**

39595-111

PLEASE TYPE OR PRINT IN BLACK INK.

Before Completing this Form Please Read the Instructions on the Back.

FILING FEE \$135.00

1. Name of Company: Platinum Capital Financial Group, LLC

2. Registered Office Address: (P.O. Box is Unacceptable)

2715 Pioneer Trail Medina MN 55340  
Complete Street Address or Rural Route and Rural Route Box Number City State ZIP Code

3. Name of Registered Agent (optional): \_\_\_\_\_

4. Business Mailing Address: (if different from registered office address)

SAME  
Address City State ZIP Code

5. Desired Duration of LLC: (in years) \_\_\_\_\_ (If you do not complete this item, a perpetual duration is assumed by law.)

6. Does this LLC own, lease or have any interest in agricultural land or land capable of being farmed?  
(Check One) Yes \_\_\_\_\_ No x

7. Name and Address of Organizer(s):

Name (print)	Complete Address			Original Signature (required)
	Street	City	State Zip	
Shawn Emil Kostrzewa	8243 Hiawatha Circle			
	Eden Prairie	MN	55347	
Ronald Stephan Musich	2715 Pioneer Trail			
	Medina	MN	55340	

8. Name and Telephone Number of Contact Person for this LLC:

Name Shawn Kostrzewa

Phone 612 991-1111

00020781 Rev. 09/02

427570

STATE OF MINNESOTA  
DEPARTMENT OF STATE  
FILED

MAR 18 2003

Secretary of State

39595-LLC



MINNESOTA SECRETARY OF STATE  
AMENDMENT OF ARTICLES OF  
ORGANIZATION FOR A  
LIMITED LIABILITY COMPANY  
MINNESOTA STATUTES CHAPTER 322B



LLC-RO

PLEASE TYPE OR PRINT IN BLACK INK.

Before Completing this Form Please Read the Instructions on the Back.

FILING FEE \$35.00

1. Name of Company:

Platinum Capital Financial Group, LLC

List the name of this company prior to filing this amendment.

AMENDMENT OPTIONS: The articles of organization for this Limited Liability Company are amended. COMPLETE AS MANY AMENDMENT OPTIONS AS APPLY. COMPLETE AN OPTION ONLY IF YOU ARE CHANGING THE INFORMATION RELATED TO THAT OPTION.

2. The company name is changed to: (see instructions in No. 2 on the reverse side prior to completing)

3. The registered office address is changed to:

8243 Hiawatha Circle

Eden Prairie

MN 55347

Complete Street Address or Rural Route and Rural Route Box Number  
(P.O. Box is Unacceptable)

City

State ZIP Code

4. The registered agent is changed to:

5. The duration, in years, of the articles of organization is changed to:

6. Business mailing address: (if different from registered office address)

Address

City

State ZIP Code

7. The articles of organization are otherwise amended as follows:

STATE OF MINNESOTA  
DEPARTMENT OF STATE  
FILED  
AUG 15 2003  
Mary Kiffmeyer  
Secretary of State

This amendment has been approved pursuant to Minnesota Statutes Chapter 322B. I certify that I am authorized to execute this amendment and I further certify that I understand that by signing this amendment, I am subject to the penalties of perjury as set forth in Minnesota Statutes Section 609.48 as if I had signed this amendment under oath.

Original Signature

Name and telephone number of contact person for this LLC Shawn Kostrzewa

612-991-1111

39595-LLC

LLC - AM



MINNESOTA SECRETARY OF STATE  
**AMENDMENT OF ARTICLES OF  
 ORGANIZATION FOR A  
 LIMITED LIABILITY COMPANY**  
 MINNESOTA STATUTES CHAPTER 322B

PLEASE TYPE OR PRINT IN BLACK INK.

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3. The registered office address is changed to:

MN

Complete Street Address or Rural Route and Rural Route Box Number  
 (P.O. Box is Unacceptable)

City

State ZIP Code

4. The registered agent is changed to:

5. The duration, in years, of the articles of organization is changed to:

6. Business mailing address: (if different from registered office address)

8243 Hiawatha Circle

Eden Prairie

MN

55347

Address

City

State ZIP Code

7. The articles of organization are otherwise amended as follows:

Change in principal ownership:

Shawn E. Kostrzewa - Chief Manager / President  
 Adam K. Johnson - Manager / Secretary  
 Rosanna Nelson - Manager / Treasurer  
 Andre Arsts - Manager / COO Residential  
 Tony Bianchi - Manager / COO Commercial

STATE OF MINNESOTA  
 DEPARTMENT OF STATE  
 FILED

SEP 30 2003

*Mary Hoffmeyer*  
 Secretary of State

This amendment has been approved pursuant to Minnesota Statutes Chapter 322B. I certify that I am authorized to execute this amendment and I further certify that I understand that by signing this amendment, I am subject to the penalties of perjury as set forth in Minnesota Statutes Section 60A.02, as if I had signed this amendment under oath.

Original Signature

Name and telephone number of contact person for this LLC Shawn E. Kostrzewa

612 991-1111



39595-LLC

LLC- RD



MINNESOTA SECRETARY OF STATE  
**AMENDMENT OF ARTICLES OF  
ORGANIZATION FOR A  
LIMITED LIABILITY COMPANY**  
MINNESOTA STATUTES CHAPTER 322B



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PLEASE TYPE OR PRINT IN BLACK INK.

Before Completing this Form Please Read the Instructions on the Back.

FILING FEE \$35.00

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Platinum Capital Financial Group, LLC

List the name of this company prior to filing this amendment.

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3. The registered office address is changed to:

333 Washington Avenue-North Suite #206 ✓ Minneapolis MN 55401  
Complete Street Address or Rural Route and Rural Route Box Number City State ZIP Code  
(P.O. Box is Unacceptable)

4. The registered agent is changed to:

5. The duration, in years, of the articles of organization is changed to:

6. Business mailing address: (If different from registered office address)

333 Washington Avenue-North Suite #206 Minneapolis MN 55401  
Address City State ZIP Code

7. The articles of organization are otherwise amended as follows:

STATE OF MINNESOTA  
DEPARTMENT OF STATE  
FILED

MAR 12 2004

Mary Kiffmeyer  
Secretary of State

This amendment has been approved pursuant to Minnesota Statutes Chapter 322B. I certify that I am authorized to execute this amendment and I further certify that I understand that by signing this amendment, I am subject to the penalties of perjury as set forth in Minnesota Statutes Section 609.46 as if I had signed this amendment under oath.

Original Signature

Name and telephone number of contact person for this LLC Shawn E. Kostrzewa 612-746-1664