11/5000006411

(Req	uestor's Name)	<u> </u>		
. (Add	lress)			
(Add	ress)			
(City	/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



600273347826

FILED
2015 AUG 13 AM 9: 20
SECRETARY OF STATE

15 AUS 13 PM 1: 49

K.SALY EXAMINER AUG 1 4 2015 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 740849 8060202

AUTHORIZATION: Spelle Rena

COST LIMIT : \$ \frac{1}{25} \tag{0}

ORDER DATE: August 10, 2015

ORDER TIME : 10:19 AM

ORDER NO. : 740849-004

CUSTOMER NO: 8060202

FOREIGN FILINGS

NAME: PLATINUM ELIXIR, LLC

XXXX QUALIFICATION (TYPE: <u>LL</u>)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER:

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: PLATINUM ELIXIR, LLC
Name of Limited Liability Company
The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida
Please return all correspondence concerning this matter to the following:
Bonne Z. Scheflin
Name of Person
Scheflin Law Group, P.A.
Firm/Company
9850 Stirling Road, Suite #100
Address
Cooper City, Florida 33024
City/State and Zip Code
attorney@scheflinlaw.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Bonne Z. Scheflin 954 862-2262
Name of Contact Person Area Code Daytime Telephone Number
MAILING ADDRESS: Division of Corporations Registration Section P O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
Enclosed is a check for the following amount: □ \$125.00 Filing Fee □ \$130.00 Filing Fee & □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate Certificate of Status Certified Copy □ \$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited ability Company," "L.L.C," or "LLC.")
2.	Delaware 3.
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5.	1049 North 21st AVE
	Hollywood, FL, US, 33020
6.	1049 North 21st Ave (Street Address of Principal Office)
	Hollywood, FL, US, 33020
	(Mailing Address)
7	The name, title or capacity and address of the person(s) who has/have authority to manage is/are:
(Greg Tejada AMBR- 1049 North 21st Ave Hollywood, FL 33020
F	Pamela G. Greenside AMBF 1049 North 21st Ave Hollywood, FL 33020

8. 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)

Signature of an authorized person

(In accordance with section 605.0203, F.S., 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.)

Pamela G. Greenside

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113 or 605.0902 (1)(d), FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

If unavaila	ble, the alternate to be used in t	he state of Florida is:	
2. The nar	me and the Florida street addres	s of the registered agent and office	ce are:
	Corporation Service Compa	any	S NO
	***************************************	(Name)	HASSE
	1201 Hays Street		mor ?
	Florida Street A	ddress (P.O. Box NOT ACCEPTABLE)	LORID
	Tallahassee	32301	***
		City/State/Zip	
liability con registered of statutes rel	mpany at the place designated in agent and agree to act in this ca ating to the proper and complete	d to accept service of process for n this certificate, I hereby accept to pacity. I further agree to comply e performance of my duties, and I gistered agent as provided for in (the appointment as with the provisions of all am familiar with and
	Corporation Service Compan	ny	
	B y :	10. 7	— Melissa Zender

\$ 25.00 Designation of Registered Agent Certified Copy (optional)

Certificate of Status (optional)

\$ 30.00

\$ 5.00

Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "PLATINUM ELIXIR, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE THIRTEENTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "PLATINUM ELIXIR, LLC" WAS FORMED ON THE ELEVENTH DAY OF AUGUST, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5801341 8300

151167540

DATE: 08-13-15

AUTHENTACATION: 2641219

Jeffrey W. Bullock, Secretary of State

You may verify this certificate online at corp.delaware.gov/authver.shtml