

P02000099326  
TRANSMITTAL LETTER

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

SUBJECT: PLATINUM RENOVATIONS, INC.  
(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

900007677169--1  
-09/12/02--01014--007  
\*\*\*\*\*87.50 \*\*\*\*\*87.50

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:

☐ \$70.00  
Filing Fee

☐ \$78.75  
Filing Fee  
& Certificate of Status

☐ \$78.75  
Filing Fee  
& Certified Copy

☒ \$87.50  
Filing Fee,  
Certified Copy  
& Certificate of  
Status

ADDITIONAL COPY REQUIRED

FROM: Cassiano Azera

Name (Printed or typed)

6915 Superior Street Circle

Address

Sarasota, FL 34243

City, State & Zip

(941) 360-9518

Daytime Telephone number

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

02 SEP 12 PM 2:50

FILED

NOTE: Please provide the original and one copy of the articles.

Bm 9/13

## ARTICLES OF INCORPORATION

In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)

### ARTICLE I NAME

The name of the corporation shall be:

Platinum Renovations, Inc.

### ARTICLE II PRINCIPAL OFFICE

The principal place of business/mailling address is:

6915 Superior Street Circle  
Sarasota, Florida 34243

### ARTICLE III PURPOSE

The purpose for which the corporation is organized is:  
Provide residential and commercial renovations.

### ARTICLE IV SHARES

The number of shares of stock is:  
1000 shares of no par value

### ARTICLE V INITIAL OFFICERS/DIRECTORS (optional)

The name(s), address(es) and title(s):

Cassiano Azera 6915 Superior Street Circle, Sarasota, FI 34243 (Director)  
David Porter 8420 Bessemer Ave. North Port, FI 34287 (Director)

### ARTICLE VI REGISTERED AGENT

The name and Florida street address of the registered agent is:

Cassiano Azera 6915 Superior Street Circle, Sarasota, FI 34243

### ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

David Porter 8420 Bessemer Ave. North Port, FI 34287

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*Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity*

\_\_\_\_\_  
Signature/Registered Agent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature/Incorporator

\_\_\_\_\_  
Date

FILED  
02 SEP 12 PM 2:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

9-10-2002

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