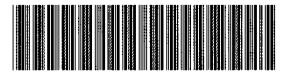
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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PłCK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

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SECRETARY OF STATE

14 9/8

COVER LETTER

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

SUBJECT: Pla	ATINUM SUICTY (PROPOSED CORPORA	Services In	С
	(PROPOSED CORPORA	TE NAME – <u>MUST INCI</u>	LUDE SUFFIX)
Enclosed are an orig	inal and one (1) copy of the artic	cles of incorporation and	i a check for:
<u></u>	_		
\$70.00	□ \$78.75	□ \$78.75	□ \$87.50
Filing Fee	Filing Fee	Filing Fee	Filing Fee,
	& Certificate of Status	& Certified Copy	Certified Copy
			& Certificate of Status
		ADDITIONAL CO	
		, and a second	
FROM:	Kamon Berse	5	
	Ramon Berge	(Printed or typed)	
		^	
	519 S. Andrev		
	•	Address	
		± . 355	_ 1
	Ft. Lauderdale	(-) 5539	<u> </u>
	City,	, suite & Zip	
	954- 463-936	ماء	
		Celephone number	

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

ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	TLED
ARTICLE I NAME	08 AUG PM : 20
The name of the corporation shall be:	SECRETARY OF STATE
Platinum Surety Services Inc.	TALLAHASSEE, FLORIDA
ARTICLE II PRINCIPAL OFFICE	
The principal <u>street</u> address and mailing address, if different is: 519 S. Andrews Ave	
Ft. Laudendale, F1 33301	
ARTICLE III PURPOSE	
The purpose for which the corporation is organized is:	
Bail Bands	
ARTICLE IV SHARES	
The number of shares of stock is:	
ARTICLE VI REGISTERED AGENT The name and Florida street address (P.O. Box NOT acceptable) of the	annistand agant is
Ranon Berses	registered agent is.
519 S. Andrews Ave	
Ft. Lauderdale, F1 33301	
ARTICLE VII INCORPORATOR	
The <u>name and address</u> of the Incorporator is:	
Ramon Berges 519. S. Andrews Ave Ft. Laudendale, F1 33301	
FL Lowledge Fl 23301	

Having been named as registered agent to accept service of process for the above sta- certificate, I am familiar with and accept the appointment as registered agent and agree	
Ph	-1. I
Sharp Distance A cont	<u>8(</u>
Signature/Registered Agent	Date 8/5/≠8
Signature (Incorporator	012/20
	Date