

P/4000031419

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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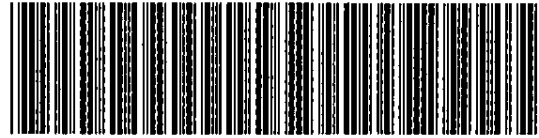
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K 04/08/14

COVER LETTER

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

SUBJECT: PLATINUM CONNECTIONS, INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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: Kimberly Gonzales

Name (Printed or typed)

3101 South Port Royale Blvd. #232

Address

Fort Lauderdale, FL 33308

City, State & Zip

954-465-4655

Daytime Telephone number

Kimberly.Gonzales@boatinternationalmedia.com

E-mail address: (to be used for future annual report notification)

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)

ARTICLE I NAME

The name of the corporation shall be: PLATINUM CONNECTIONS, INC.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

3101 South Port Royale Blvd. #232

Fort Lauderdale, FL 33308

ARTICLE III PURPOSE

The purpose for which the corporation is organized is:

All legal purposes to which corporation can avail itself.

ARTICLE IV SHARES

The number of shares of stock is: 100

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Kimberly Gonzales, Pres.

Name and Title: _____

Address 3101 South Port Royale Blvd.

Address: _____

#232

Fort Lauderdale, FL 3308

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

Name and Title: _____

Name and Title: _____

Address _____

Address: _____

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CLERK OF DISTRICT COURT
PALM BEACH COUNTY, FLORIDA

(conti.)

Name and Title: _____ Name and Title: _____
Address _____ Address: _____

ARTICLE VI REGISTERED AGENT

The **name and Florida street address** (P.O. Box NOT acceptable) of the registered agent is:

Name: Kimberly Gonzales
Address: 3101 S. Port Royale Blvd. #232
Fort Lauderdale, FL 33308

ARTICLE VII INCORPORATOR

The **name and address** of the Incorporator is:

Name: Kimberly Gonzales
Address: 3101 S. Port Royale Blvd. #232
Fort Laauderdale, FL 33308

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CORPORATION
TALLAHASSEE, FL 32309

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

Required Signature/Registered Agent

4/3/2014

Date

I submit this document and affirm that the facts stated herein are true. I am aware that the 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.

Required Signature/Incorporator

4/3/2014

Date