

P15000002270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

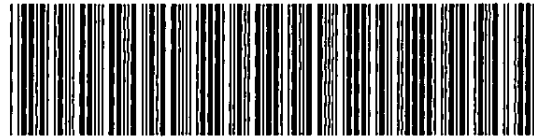
Certified Copies _____ Certificates of Status _____

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T. SCOTT



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TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2015 JAN -9 PM 9:12

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

SECRETARY OF STATE
TALLAHASSEE FL 32399

15 JAN -9 AM 10:37

APPROVED
AND
FILED

COVER LETTER

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

SUBJECT: Platinum Entertainment, 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: Jason Luce
Name (Printed or typed)

926-7 W Tharpe St.
Address

Tallahassee, Florida 32303
City, State & Zip

919-818-4809
Daytime Telephone number

JCL3120@gmail.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 Entertainment Inc.

ARTICLE II PRINCIPAL OFFICE

Principal street address

Mailing address, if different is:

926-7 W Tharpe st

Tallahassee FL 32303

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: Any and lawful business

ARTICLE IV SHARES

The number of shares of stock is: 1

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title: Jason Luce - President

Name and Title: _____

Address

926-7 W Tharpe st
Tall 32303

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

Name and Title: _____

Name and Title: _____

Address

Address: _____

15 JAN -9 AM 10:37
SECRET
FBI - TALLAHASSEE

APPROVED
AND
FILED

(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:

Jason Scoggins

Address:

2877 West Tharpe St Unit D
Tall 32303

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name:

Jason Luce

Address:

628 Stiles Dr.

Tallahassee, FL 3203

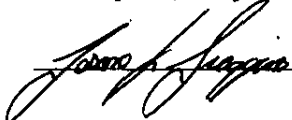
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TALLAHASSEE, FLORIDA

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AND
FILED

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

01-9-15

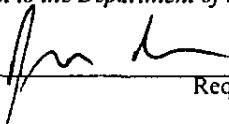


Required Signature/Registered Agent

Date

02-9-15

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

Date

01-9-15