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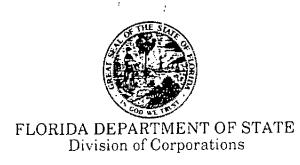
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January 2, 2025

CT CORP

SUBJECT: PFR GOLD FUND L.P. Ref. Number: W25000000198

CORRECTED
Please Allow For
Same File Date

We have received your document for PFR GOLD FUND L.P. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Any partner or agent of a partnership that is a legal or other commercial entity, and not an individual, must be organized or otherwise registered and maintain an active status with the Florida Department of State. It cannot be dissolved, revoked, canceled or withdrawn.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

"If you have any questions concerning the filing of your document, please call.

Emani D Manning Regulatory Specialist II

Letter Number: 625A00000034

CT CORP

(850) 656-4724 3458 lakesore Drive

Tallahassee, FL 32312

Da	ate:	12/30/2024	4:1 DW		
		Acc#I20160000072	4: () 3 W		
Name:	PFR Gold F	und, L.P.			
Document #:					
Order #:	16063920				
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of					
Apostille/Notarial Certification:		Country of Destination: Number of Certs:			
Filing:	Certified:	✓	Email Address for Annual Report Notifications		
	Plain: COGS:		stuart.merzer@paulsonco.com		
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$	1052.50			

Thank you!

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

L.PFR Gold Fund, L.P. (Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix) Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd. Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P. or LLLP. If name unavailable, name under which the limited partnership or limited liability limited partnership proposes to register to transact business in Florida; must contain acceptable suffix. 3. March 31, 2009 Date of Formation State or Country of Formation 4. Federal Employer Identification Number. 26-4636005 5. Name of Registered Agent for Service of Process and Florida Street Address: Corporation Service Company 1201 Hays Street Tallahassee, FL 32301 6. Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. /s/ Sophia Geringswald Signature of Registered Agent 8. Mailing Address: 7. Principal Office: 205 Worth Ave, Suite 104-105 205 Worth Ave, Suite 104-105 Palm Beach, FL 33480 Palm Beach, FL 33480 9. If limited partnership is a limited liability limited partnership, check box. \Box 10. Name, principal office address, and mailing address of each general partner: Name of General Partner:____Paulson Advisers LLC Name of General Partner: 205 Worth Ave, Suite 104-105 Street Address: Street Address: Palm Beach, FL 33480 Mailing Address: _____ Mailing Address: _____ Name of General Partner: Name of General Partner: Street Address: Street Address: __ Mailing Address: _____ Mailing Address: _____

Page 1 of 2

Name of General Partner:		N	ame of General	Partner:
Street Address:		Si		
Mailing Addres	s:			
(Effective date can Note: If the date ins document's effectiv	serted in this block does not me date on the Department of S rtificate of existence duly author of State, by the Secretary of S	90 days after the date in the the applicable state state's records.	this document is utory filing requ nan 90 days prio	filed by the Florida Department of State.) airements, this date will not be listed as the r to the delivery of this application to the of the entity's records in the jurisdiction under
Signed this	day of	mber	.20 24	
	/s/	/ Stuart L. Merzer Signature of a ge		Authorized Person of the General Partner
The individual sign submitted in a docu	ing this document affirms that ment to the Department of Sta	t the facts stated hereir	n are true and th	e individual is aware that false information provided for in s.817.155, F.S.
C	iling Fees: ertified Copy (optional): ertificate of Status (optional	\$52.50	00 (\$965 Filing	Fee and \$35 Registered Agent Fee)

Page 2 of 2

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "PFR GOLD FUND, L.P." 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 THIRTIETH DAY OF DECEMBER, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 205254490

Date: 12-30-24

4671513 8300

SR# 20244639625