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10/20/09--01026--020 **130.00

EFFECTIVE DATE 10/16/09

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 OCT 20 PM 12:27

B. KOHR

OCT 29 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

EFFECTIVE DATE 10/16/09

October 22, 2009

THOMAS M. VALDES
FAT BOY PRODUCTIONS, LLC
4557 AVALON STREET
BOCA RATON, FL 33428

SUBJECT: FAT BOY PRODUCTIONS, LLC
Ref. Number: W09000047033

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We have received your document for FAT BOY PRODUCTIONS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$130.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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 (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 809A00033661

FAX

EFFECTIVE DATE

10/16/09

Company name: FernGold Enterprises

Mailing address: 5737 NW 49 Lane

Coconut Creek Fl 33073

Phone:

954-647-8784

Fax:

FILED STATE
DIVISION OF CORPORATIONS
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TO: Mr. Buck Kohr

FROM: Lynn F. Goldberg

FAX #: 850-245-6030

FAX #:

DATE: October 29, 2009

OF PAGES: 3

Message:

Buck,

Here are the updated article pages for your submission.

Please let me know if there is anything else you require from either myself or Thomas M. Valdes.

I do appreciate your time in helping us move this matter along.

You can reach me via email or cell...whichever you prefer.

Lynn Goldberg

954-647-8784

LLGold98@yahoo.com

EFFECTIVE DATE 10/16/09

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: East New York Productions, LLC
Name of Limited Liability Company

FILED
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DIVISION OF CORPORATIONS
09 OCT 20 PM 12:27

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas M. Valdes

Name of Person

East New York Productions, LLC

Firm/Company

4557 Avalon Street

Address

Boca Raton, Florida 33428

City/State and Zip Code

tommyvaldes@comcast.net

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

For further information concerning this matter, please call:

Lynn Fernandez-Goldberg

Name of Person

at (954) 647-8784

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

EFFECTIVE DATE 10/16/09

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

East New York Productions, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

4557 Avalon Street
Boca Raton, Florida 33428

4557 Avalon Street
Boca Raton, Florida 33428

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Lynn Fernandez-Goldberg

Name

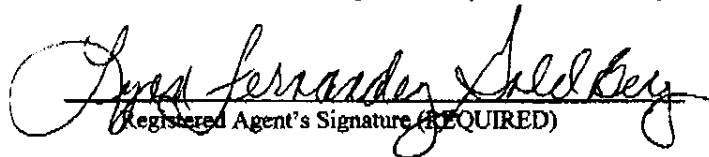
5737 NW 49 Lane

Florida street address (P.O. Box **NOT** acceptable)

Coconut Creek, 33073 FL

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..


(Registered Agent's Signature (REQUIRED))

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

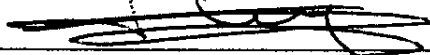
Thomas M. Valdes

Manager

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 16, 2009, (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Thomas M. Valdes

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)