

L21000535127

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

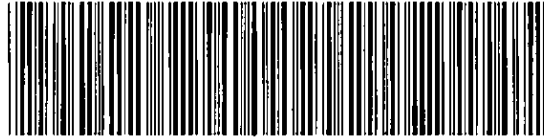
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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2021 DEC 29 PM 3:59

SECRETARY OF STATE  
TALLAHASSEE, FL

REC'D

2021 DEC 29 PM 3:41

TALLAHASSEE, FL 32304

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302  
155 Office Plaza Dr Ste A Tallahassee FL 32301  
PHONE: (800) 435-9371; FAX: (866) 860-8395**

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**DATE:** 12/29/21

**NAME:** GOLDY PRODUCTIONS LLC

**TYPE OF FILING:** ARTICLES

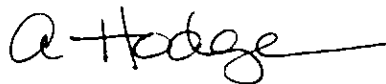
**COST:** 125.00

**RETURN:** PLAIN COPY PLEASE

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**ACCOUNT:** FCA000000015

**AUTHORIZATION:** ABBIE/PAUL HODGE



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**COVER LETTER**

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Goldy Productions, LLC  
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Cheryl Quisenberry

Name of Person

Parkstone Wealth Management, LLC

Firm/Company

1000 Ballpark Way Suite 302

Address

Arlington, Texas 76011

City/State and Zip Code

cquisenberry@parkstonewealth.com

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

For further information concerning this matter, please call:

Cheryl Quisenberry      214      683-8212  
at (      )  
Name of Person      Area Code      Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|---|---|

**Mailing Address**

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

**Street Address**

New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 2021 DEC 29 PM 3: 59

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SECRETARY OF STATE  
TALLAHASSEE, FL

Goldy Productions, LLC

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

**ARTICLE II - Address:**

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

**Principal Office Address:**

12230 Tillinghast Circle  
Palm Beach Gardens FL 33418

**Mailing Address:**

1000 Ballpark Way Suite 302  
Arlington, Texas 76011

**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:

PARACORP INCORPORATED

Name

155 OFFICE PLAZA DRIVE - 1ST FLOOR

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

TALLAHASSEE

FLORIDA

32301

City

State

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 605, F.S..*



, Jody Moua, Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR

PAUL GOLDSCHMIDT  
1000 BALLPARK WAY SUITE 302  
ARLINGTON, TEXAS 76011

MGR

TOM MACKAY  
1000 BALLPARK WAY SUITE 302  
ARLINGTON, TEXAS 76011

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SECRETARY OF STATE  
TALLAHASSEE, FL

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: N/A (OPTIONAL)

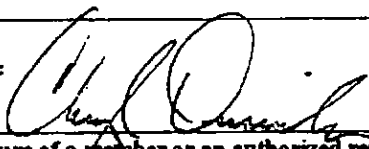
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

N/A

**REQUIRED SIGNATURE:**

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any 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.

CHERYL QUISENBERRY, AUTHORIZED REPRESENTATIVE

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)