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(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	#)
PICK-UP	WAIT	MAIL
(Bus	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to I	Filing Officer:	-

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RECEIVED

Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 622812 4325417 AUTHORIZATION : COST LIMIT : ; ORDER DATE: April 14, 2022 ORDER TIME : 8:08 AM ORDER NO. : 622812-005 CUSTOMER NO: 4325417 DOMESTIC FILING NAME: GOLD SQUARE FLORIDA LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION \_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS: \_\_\_\_\_

CORPORATION SERVICE COMPANY

\_\_\_ CERTIFIED COPY
\_\_\_ PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

1201 Hays Street

# **COVER LETTER**

TO:	New Filing Se Division of Co				
SUBJE	Gold Squa	are Florida LLC			
30 201.		Nan	e of Limited I	Liability Company	
The enc	closed Articles o	f Organization and t	fee(s) are subr	nitted for filing.	
Please r	etum all corresp	ondence concerning	g this matter to	the following:	
	Abraham G	old			
			Na	me of Person	
	Gold Squar	e Florida LLC			
	<del></del>		Fir	m/Company	<del></del>
	210 Grove	Way			
			· · · · · · · · · · · · · · · ·	Address	
	Delray Bead	ch, Florida 33444			
	algold77@gr	noil com	City/Sta	ite and Zip Code	· J
		=	be used for fu	ture annual report notifica	ttion)
For further	er information co	oncerning this matte	r, please call:	·	·
	Hans G. Pola	ak	973 at (	425-8684	
	Nam	ne of Person	Area Co	de Daytime Telepho	ne Number
Enclosed	d is a check for t	he following amoun	ıt:		
	00 Filing Fee	□\$130.00 Filing Certificate of Sta	; Fee & E	I\$155.00 Filing Fee & ertified Copy itional copy is enclosed)	□\$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address		Street Address	
		iling Section of Corporations		New Filing Section I. The Centre of Tallah	
	P.O. B	ox 6327		2415 N. Monroe Stre	cet, Suite 810
	Tallah	assee, FL 32314		Tallahassee, FL 3230	03

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	EI-	Name:
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The name of the Limited Liability Company is:

FILED

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Gold	Square	Florida	LLC

(Must conatin the words "Limited Liability Company, "L.L.C.," or "LI.C.")

SECRETARY UP STATE TALLAHASSEE, FL

	incipal Office Address:		Mailing Address:
210 Grove Way	/	21	0 Groye Way
Delray Beach,	Florida 33444	De	dray Beach, Florida 33444
	h an active Florida registration treet address of the registered		
	Abraham Gold		
		Name	
	210 Grove Way		
	Florida street addres	s (P.O. Box <u>NOT</u>	acceptable)
	Delray Beach	FI.	33444
	City	State	Zip
ignated in this certif gree to comply with i	icate, I hereby accept the app the provisions of all statutes re	ointment as registe elating to the prope	ne above stated limited liability compa red agent and agree to act in this cape or and complete performance of my du t as provided for in Chapter 605, F.S

(CONTINUED)

## ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Membe "MGR" = Manager	r
AMBR	Abraham Gold
	210 Grove Way Delray Beach, Florida 33444
AMBR	Hilary Gold 210 Grove Way Delray Beach, Florida 33444
	HASS P
<del></del>	
	<b>5.</b>
an effective date is listed, the date mu date of filing.)	the date of filing:
TICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	11/4/
This document I am aware that	e of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes, any false information submitted in a document to the Department of State rd degree felony as provided for in s.817.155, F.S.
Abraham	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)