JOSEPH M. MASON, JR.*

* ALSO ADMITTED IN:

LAW OFFICES OF

McGee & Mason

PROFESSIONAL ASSOCIATION
IOI SOUTH MAIN STREET
POST OFFICE BOX 1900
BROOKSVILLE, FLORIDA 34605-1900

TELEPHONE: (352) 796-0795 FACSIMILE: (352) 796-0235

WRITER'S DIRECT E-MAIL ADDRESS: JOEMASON@McGEEMASONLAW.COM

October 1, 2025

RICHARD E. McGEE, SR. (1916 - 2005)

PLEASE REPLY TO POST OFFICE BOX

Florida Department of State Division of Corporations 2415 Monroe Street, Suite 810 Tallahassee, Florida 32303-4112

Via UPS Overnight

Re:

Gold Dust Farms, an unregistered Florida General Partnership

Gentlemen:

Enclosed you will find a fully executed *Partnership Registration Statement* and *Cover Letter* for Gold Dust Farms, a heretofore unregistered Florida General Partnership. Please file the same to complete the registration of the partnership with your office.

Also enclosed is a fully executed Statement of Partnership Authority and Cover Letter for filing with regard to Gold Dust Farms. Since the Partnership Registration Statement must be filed prior to the filing of the Statement of Partnership Authority, please clock-stamp the Statement of Partnership Authority at least one minute after clock-stamping the Partnership Registration Statement.

Please provide us with a certified copy both of the *Partnership Registration Statement* and of the *Statement of Partnership Authority*. Further, please provide us with a *Certificate of Status* for the Partnership Registration.

In addition, please find our check for your fee regarding the above-referenced matters. The check is in the amount of \$188.75, and covers the \$50.00 charge for the *Partnership Registration Statement*, the \$25.00 charge for the *Statement of Partnership Authority*, the \$52.50 charge for each of the certified copies of those documents, and the \$8.75 charge for the *Certificate of Status*.

Please forward the certified copies and Certificate of Status to me at Post Office Box 1900, Brooksville, Florida 34605-1900. In the meantime, if you have any questions regarding this matter, or if you need any further information regarding the same, please let me know.

Very sincerely yours,

JOSEPH M. MASON, JR.

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(For Office Use Only)

COVER LETTER
nership
lame of Partnership)
ee(s) are submitted for filing.
r to the following:
call:
352 796-0795 at ()
(Area Code & Daytime Telephone Number)
Street Address: Reinstatement Section

Reinstatement Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Reinstatement Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PARTNERSHIP REGISTRATION STATEMENT

1. Gold Dust Farms, a Florida General Partnership	
(Name of P	artnership)
2. Florida/Hernando County	3. 59-2878709
(State/County of Formation)	(FEI Number)
4. 101 South Main Street, Brooksville, Florida 34601-3336	1.0-
(Street Address of Ch	ief Executive Office)
5	
101 South Main Street, Brooksville, Florida 34601-3336	200 - 1 - 11 - 12 - 11 - 11 - 11
	Office in Florida, if applicable)
 In accordance with s. 620.8105(1)(c)(1 & 2), Florida Statutes following options: 	s, required partner information is provided in one of the
Attached is a list of the names and mailing addresses of than individuals, or:	f ALL partners and Florida Registration Numbers, if other
The name and street address of the agent in Florida who	o shall maintain a list of the names and addresses
of all partners: NAME & FLORIDA STREET ADDRESS OF FLORIDA AGENT	IF OTHER THAN INDIVIDUAL, FLORIDA REGISTRATION NUMBER
Joseph M. Mason, Jr., Managing Partner	
101 South Main Street	
Brooksville, Florida 34601-3336	
If any of the partners are other than individuals, its entity name a	
Partner Entity Name	Florida Document Number
7. Effective date, if other than the date of filing:	
(Effective date cannot be prior to the date of filing nor m	ore than 90 days after the date of filing.)
NOTE: If the date inserted in this block does not meet the appliance the document's effective date on the Department of State's reason.	icable statutory filing requirements, this date will not be listed cords.
The execution of this statement constitutes an affirmation under	the penalties of perjury that the facts stated herein are true.
We are aware that any false information submitted in a documen as provided for in s. 817.155, F.S.	at to the Department of State constitutes a third degree felony
Signed thisday ofOctober	2025
41111116	VI T
Signatures of TWO Partners:	
Collection	
Typed or printed names of partners signing above: Joseph M. Ma	ason, Jr.
Robert A. Buc	a
[A70.00
Filing Fee: Certified copy:	\$50.00 \$52.50 (optional)
Certificate of Status:	\$ 8.75 (optional)



(For Office Use Only)

COVER LETTER

TO:		statement Section sion of Corporations		
SUBJ	ECT:	Gold Dust Farms, a Florida General Partnership (Name of Partnership)		
D D D 0	LCI.			
DOCU	JMEN	NT NUMBER:		
The en	closed	d Statement of Partnership Authority and fee(s) are submitted for filing.		
Please	return	all correspondence concerning this matter to the following:		
Joseph	M. Mas	son, Jr., Managing Partner		
		(Name of Person)		
McGee	& Mas	son, P.A.		
		(Firm/Company)		
Post Of	ffice Bo	ox 1900		
		(Address)		
Brooks	ville, Fl	lorida 34605-1900		
Porton Co.		(City/State and Zip Code)		
For fu	rther is	nformation concerning this matter, please call:		
Joseph	M. Mas	son, Jr. at (352 796-0795		
		(Name of Person) (Area Code & Daytime Telephone Number)		

Mailing Address:

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

Street Address:

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

CR2E072 (6/17)

STATEMENT OF PARTNERSHIP AUTHORITY

Pursuant to section 620.8303, Florida Statutes, this partnership submits the following statement of partnership authority: (Note: A statement of partnership authority cannot be filed with the Florida Department of State unless a partnership registration was previously filed and is of record with this office.) FIRST: The name of the partnership is: Gold Dust Farms, a Florida General Partnership SECOND: The partnership was registered with the Florida Department of State on and assigned registration number GP **THIRD:** The names and addresses of the partners authorized to execute an instrument transferring real property held in the name of the partnership are: Joseph M. Mason, Jr. 101 South Main Street, Brooksville, Florida 34601-3336 Robert A. Buckner 101 South Main Street, Brooksville, Florida 34601-3336 James H. Kimbrough, Jr. 101 South Main Street, Brooksville, Florida 34601-3336 John Thomas Bronson 101 South Main Street, Brooksville, Florida 34601-3336 (Please list additional partners on attachment, if necessary) **FOURTH:** If applicable, state or include the authority, or limitations on the authority, of any of the partners to enter into other transactions on behalf of the partnership, and any other matter: Names and addresses of Partners: Statement of Authority or Limitation of Authority: Joseph M. Mason, Jr. (same address as above) Any one (1) of the listed Partners is authorized to Robert A. Buckner (same address as above) execute all documents relating to use, development, and/or transfer of the Partnership's property, James H. Kimbrough, Jr. (same address as above) John Thomas Bronson (same address as above) provided, however, execution by Messrs. Mason, either Buckner or Kimbrough, and Bronson is required for the instrument of title transfer. (Please list additional partners on attachment, if applicable.) **FIFTH:** Effective date, if other than the date of filing: (Effective date cannot be prior to the date of filing nor more than 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. The execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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. Signed this My day of OCTOBER Signatures of a partner or authorized person: Typed or printed name of person signing above: Joseph M. Mason, Jr., Managing Partner NOTE: A FILED STATEMENT OF PARTNERSHIP AUTHORITY IS CANCELED FIVE YEARS AFTER THE DATE ON WHICH THIS STATEMENT, OR THE MOST RECENT AMENDMENT, WAS FILED WITH THE DEPARTMENT OF STATE. Filing Fee: \$25.00 Certified copy: \$52.50 (optional) \$ 8.75 (optional) Certificate of Status: