

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L220005  
FILED 8:  
Decemb  
Sec. Of s  
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**Article I**

The name of the Limited Liability Company is:

PROSPERITY FUND ADVISORS LLC

**Article II**

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

5005 COLLINS AVENUE  
APT. # 721  
MIAMI BEACH, FL. US 33140

The mailing address of the Limited Liability Company is:

5005 COLLINS AVENUE  
APT. # 721  
MIAMI BEACH, FL. US 33140

**Article III**

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

ARIEL FISHMAN  
5005 COLLINS AVENUE  
APT. # 721  
MIAMI BEACH, FL. 33140

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.

Registered Agent Signature: ARIEL FISHMAN

## Article IV

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The name and address of person(s) authorized to manage LLC:

Title: MGR  
ARIEL FISHMAN  
5005 COLLINS AVENUE, APT. # 721  
MIAMI BEACH, FL. 33140 US

Title: MGR  
THOMAS S GALLAGHER  
66 LARCHMONT AVE  
LARCHMONT, NY. 10538 US

Title: MGR  
JOSEPH FISHMAN  
59 BRIARWOOD LANE  
LAWRENCE, NY. 11559 US

Signature of member or an authorized representative

Electronic Signature: THOMAS S. GALLAGHER, ESQ.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.