

7/16/2019

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000215011 3)))



H190002150113ABCU

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (614)280-3338  
Fax Number : (954)208-0845

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FOREIGN PROFIT/NONPROFIT CORPORATION  
PROSPER.ORG, INC.

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

Electronic Filing Menu

Corporate Filing Menu

Help

Z BROWN

JUL 17 2019

# APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

1. PROSPER.ORG, INC.

(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Jersey 3. 81-4536348  
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 11/29/2016 5. \_\_\_\_\_  
(Date of Incorporation) (Date of duration, if other than perpetual)

6. Upon filing  
(Date first conducted affairs in Florida if prior to registration See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
(Principal office address)

(Current mailing address, if different)

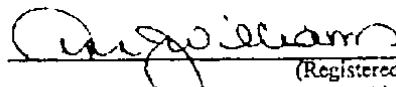
8. To create programs that help people build better lives for themselves and their families.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CT Corporation System  
Office Address: 1200 South Pine Island Road  
Plantation, Florida 33324  
(City) (Zip Code)

10. Registered agent's acceptance:  
*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

CT CORPORATION SYSTEM



(Registered agent's signature)

Ann J. Williams, Assistant Vice President

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED

## 12. Names and addresses of officers and/or directors

## A. DIRECTORS

Patricia Summers  
Chairman: \_\_\_\_\_  
5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
Address: \_\_\_\_\_

Peter W. Gibson  
Vice Chairman: \_\_\_\_\_  
5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
Address: \_\_\_\_\_

John P. Golden  
Director: \_\_\_\_\_  
5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
Address: \_\_\_\_\_

Director: \_\_\_\_\_  
Address: \_\_\_\_\_

## B. OFFICERS

Patricia Summers  
President: \_\_\_\_\_  
5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
Address: \_\_\_\_\_

Vice President: \_\_\_\_\_  
Address: \_\_\_\_\_

Peter W. Gibson  
Secretary: \_\_\_\_\_  
5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
Address: \_\_\_\_\_

Peter W. Gibson  
Treasurer: \_\_\_\_\_  
5500 Military Trail, Suite 22-129, Jupiter, FL 33458  
Address: \_\_\_\_\_

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Patricia Summers 5/26/19  
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Patricia Summers, President  
(Typed or printed name and capacity of person signing application)

AM JUL 16 11:00

FILED

**STATE OF NEW JERSEY  
DEPARTMENT OF THE TREASURY  
DIVISION OF REVENUE AND ENTERPRISE SERVICES  
SHORT FORM STANDING**

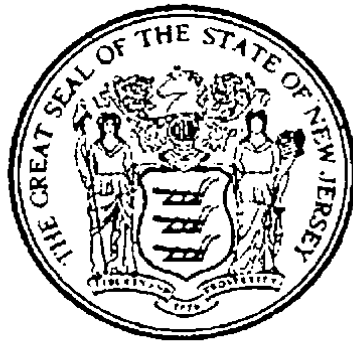
**PROSPER.ORG, INC.**  
0450122550

*I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Non-Profit Corporation was registered by this office on November 29, 2016.*

*As of the date of this certificate, said business continues as an active business in good standing in the State of New Jersey, and its Annual Reports are current.*

*I further certify that the registered agent and office are:*

THE CORPORATION TRUST COMPANY  
820 BEAR TAVERN ROAD  
WEST TRENTON, NJ 08628



*IN TESTIMONY WHEREOF, I have  
hereunto set my hand and affixed  
my Official Seal at Trenton, this  
16th day of July, 2019.*

Elizabeth Maher Muoio  
State Treasurer

Certificate Number : 609a992442

Verify this certificate online at

[http://www1.state.nj.us/TFR/StandingCert/SP/Verify\\_Cert.jsp](http://www1.state.nj.us/TFR/StandingCert/SP/Verify_Cert.jsp)