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OF JAMES PH 1: 50

W. HODGE

COVER LETTER

TO: Registration Section Division of Corporations	_
SUBJECT: Prosperity Park, LLC	_
	nited Liability Company)
The enclosed Articles of Organization and fee(s) a	re submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Ann Marie Hawkins	
	(Name of Person)
Hawkins and Company,	L.P.A.
	(Firm/Company)
1267 West 9th Street, S	Suite 500
	(Address)
Cleveland, Ohio 44113	3
	City/State and Zip Code)
For further information concerning this matter, ple	ase call·
To the manufacture of the manual pro-	
Ann Marie Hawkins	at (216) 861-1365 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Status	& \$\Bigcup \\$155.00 \text{ Filing Fee & } \Bigcup \\$160.00 \text{ Filing Fee, } \\ \text{Certificate of Status & } \\ \text{Certified Copy } \\ \text{(additional copy is enclosed)} \end{additional copy is enclosed)}
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Prosperity Park, LLC	
	any, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company
	of the principal office of the Limited Liability Company Mailing Address:
The mailing address and street address	

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

Philip J. Graffy

Name

5817 Glenholme Circle

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

Naples, Florida 34119

City, State, and 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 608, F.S.

Registered Agent's Signature (REQUIRE)

(CONTINUED)
Page 1 of 2

06 JAN 23 PH 1: 50

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Philip J. Graffy 5817 Glenholme Circle Naples, Florida 34119
MGR	Ann Marie Hawkins 1267 West 9th Street, Suite 500 Cleveland, Ohio 44113
MGR	John T. Hawkins 1267 West 9th Street, Suite 500 Cleveland, Ohio 44113
 	·
(Use attachment if necessary) ARTICLE V: Effective date, if other than the da	te of filing: (OPTIONAL)
	pecific and cannot be more than five business days prior
REQUIRED SIGNATURE:	r an authorized representative of a member.
of this document constitut that the facts stated here ANN MARIE	

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)