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(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(Cit	y/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies		of Status
Special Instructions to Filing Officer:		
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Effective Date 1 4 00

B. Tadiosis JUL 21 2008

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: Prosperity Investment Endeavors, LLC		
(Name of Limite	ed Liability Company)	
The enclosed Articles of Organization and fee(s) are	submitted for filing.	
Please return all correspondence concerning this matt	er to the following:	
Michael A. Thomas		
	(Name of Person)	
Prosperity Investment E		
	(Firm/Company)	
4008 Bolinas Ct		
	(Address)	
Orlando, FL 32817		
(City	y/State and Zip Code)	
For further information concerning this matter, please	e call:	
Michael A.Thomas	at (407) 697-2790 (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 \$\times \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & Side 160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	



July 11, 2008

MICHAEL A. THOMAS PROSPERITY INVESTMENT ENDEAVORS, LLC 4008 BOLINAS CT. ORLANDO, FL 32817

SUBJECT: PROSPERITY INVESTMENT ENDEAVORS, LLC

Ref. Number: W08000032994

We have received your document for PROSPERITY INVESTMENT ENDEAVORS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$160.00.

If you have any questions concerning the filing of your document, please call (850) 245-6911.

Brenda Tadlock Senior Section Administrator

Letter Number: 408A00040970

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company i	s:	
Prosperity Investment Endea (Must end with the words "Limited Lia		
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
4008 Bolinas Ct	4008 Bolinas Ct	
Orlando, Fi 32817	Orlando, FL 32817	
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers) business entity with an active Florida registration.) The name and the Florida street address of the	gistered Agent. You must designate an individual or another	
	Tas Telegistered agent are. Programme Date Company of the Effective Date Company of the Compan	
<u>Michael A. Thom</u>	ias The 1/4/2 3	
Nan	Effect () E	
4008 Bolinas Ct		

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..

City, State, and Zip

Orlando,

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

32817

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager Name and Address:

"MGRM" = Managing Member

MIchael A. Thomas

4008 Bolinas Ct

Orlando, FL 32817

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>July 08, 2008</u>. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Sign ture of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michael A. Thomas

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)