

L08000162649

Florida Department of State
Division of Corporations
Public Access System

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.

(((H08000248416 3)))



H080002484163ABC0

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

RECEIVED

08 NOV -3 AM 6:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.**PROSPERITY VENDOR LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

08 OCT 31 PM 11:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

T. HAMPTON

NOV - 4 2008

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 NOV - 3 A 9:05

FILED

Help

H08000248416

ARTICLES OF ORGANIZATION
OF
PROSPERITY VENDOR LLC

ARTICLE I - NAME

The name of the limited liability company is PROSPERITY VENDOR LLC ("company").

ARTICLE II - ADDRESS

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

Principal Office Address:
4560 N.W. 107 Avenue
#302
Doral, Florida 33178

Mailing Address:
4560 N.W. 107 Avenue
#302
Doral, Florida 33178

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Paola Hurtado
4560 N.W. 107 Avenue
#302
Doral, Florida 33178

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..



Paola Hurtado

FILED
2008 NOV - 3 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H08000248416

H08000248416

ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

Name and Address:

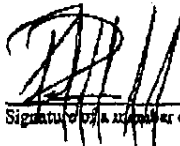
"MGR" = Manager

"MGMR" = Managing Member

MGMR

Paola Hurtado- MGMR
4560 N.W. 107 Avenue
#302
Doral, Florida 33178

REQUIRED SIGNATURE:



Signature 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.)

Paola Hurtado

Typed or printed name of signer

FILED

2008 NOV - 3 A 9:06

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H08000248416