# 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.

(((H150000099813)))



H150000099813ABC0

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 : BUSINESS FILINGS

Account Number : 105256001620 Phone : (608)827-5300

Fax Number : (608)827-5501

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

NECETY ELD

JAN 13 AN 10: 00

BLOK OF CURPORATIONS
REALI OF ECHAPERIALIENS

agent@bizfilings.com

## FLORIDA LIMITED LIABILITY CO.

**Prospect Master LLC** 

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

ؠ

608 827 5501

608 827-5601 P.002

2015 JAN 13 AM 9 21

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FAX AUDIT # H15000009981 3

# ARTICLES OF ORGANIZATION OF Prospect Master LLC

ARTICLE I

NAME

The name of the limited liability company is: Prospect Master LLC

ARTICLE II

ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be: 10676 Colonial Blvd. Suite: 40-115, Fort Myers, Florida 33913.

### ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 515 E. Park Avenue, Tallahassee, Florida 32301. Located in the County of Leon.

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 605, F.S..

Signature:

Signature:

Date: January 13, 2015

Mark Williams, A.V.P. Business Filings Incorporated

### ARTICLE IV MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the names and addresses of the members of the Limited Liability Company are:

Dolmar Cross, 10676 Colonial Blvd. Suite: 40-115, Fort Myers, Florida 33913 Damoi Cross, 10676 Colonial Blvd. Suite: 40-115, Fort Myers, Florida 33913

### FAX AUDIT # H15000009981 3

ARTICLE V

**DURATION** 

The duration for the limited liability company shall be: Perpetual.

Date: January 13, 2015

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any 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.)

Business Filings Incorporated, Organizer

Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8020 Excelsior Dr., Suite 200, Madison,

WI 53717

608-827-5300

FILEU

MIS JAN 13 M 9 22

SECRETARY OF STATE
SECRETARY OF STATE

FAX AUDIT # H15000009981 3