

# L19 000154865

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : SUPERBIZ.COM, INC.  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

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

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

**FLORIDA LIMITED LIABILITY CO.**

**Prosperity Financial Partners LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

19 JUN 20 AM 8:58  
TALLAHASSEE, FLORIDA

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JUN 21 2019

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**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I NAME**

The name of the Limited Liability Company is:

PROSPERITY FINANCIAL PARTNERS LLC

**ARTICLE II ADDRESS**


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

4725 W SAND LAKE ROAD, STE 201  
ORLANDO, FLORIDA 32819**ARTICLE III REGISTERED AGENT**

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

TAVARUS DOVE  
4725 W SAND LAKE ROAD, STE 201  
ORLANDO, FLORIDA 32819

*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.*

X   
TAVARUS DOVE / Registered Agent's signature

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H19000193088 3

H19000193088 3

PAGE 2 PROSPERITY FINANCIAL PARTNERS LLC

**ARTICLE IV AUTHORIZED PERSON(S)**

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER

TAVARUS DOVE

4725 W SAND LAKE ROAD, STE 201

ORLANDO, FLORIDA 32819

AUTHORIZED MEMBER

HOANMY DOVE

4725 W SAND LAKE ROAD, STE 201

ORLANDO, FLORIDA 32819

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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

.....

x 

TAVARUS DOVE / Authorized Representative's signature

*(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.)*

H19000193088 3