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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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(Business Entity Name)

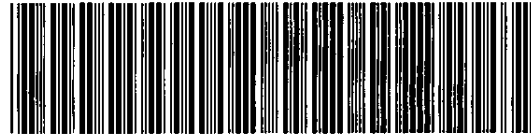
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT 14 2010

## COVER LETTER

**TO:** New Filing Section  
Division of Corporations

**SUBJECT:** Celebrations Innkeepers, Inc.

Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Thomas M. Keane, Esq.

Name of Person

Keane & Macdonald, P.C.

Firm/Company

1000 Market St., Bldg., 2, Suite 7

Address

Portsmouth, NH 03862

City/State and Zip code

tke@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas M. Keane, Esq.

Name of Person

at (603) 436-6500

Area Code & Daytime Telephone Number

### STREET/COURIER ADDRESS:

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

### MAILING ADDRESS:

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☒ \$70.00 Filing Fee    ☐ \$78.75 Filing Fee & Certificate of Status    ☐ \$78.75 Filing Fee & Certified Copy    ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT  
BUSINESS IN FLORIDA**

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO  
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Celebrations Innkeepers, Inc.

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New Hampshire

(State or country under the law of which it is incorporated)

3. 27-3417176

(FEI number, if applicable)

4. September 8, 2010

(Date of incorporation)

5. Perpetual

(Duration: Year corp. will cease to exist or "perpetual")

6. \_\_\_\_\_

(Date first transacted business in Florida, if prior to registration)  
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 6375 W. Irlo Bronson Memorial Hwy, Kissimmee, FL 34747

(Principal office address)

1000 Market St., Building 2, Suite 7, Portsmouth, NH 03801

(Current mailing address)

8. The operation and management of hotels and hotel related services.

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: C T Corporation System

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

**10. Registered agent's acceptance:**

*Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.*

By: Kristen Betzger  
C T Corporation System  
(Registered agent's signature) Vice President

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: David Akridge

Address: 1000 Market Street, Bldg. 1, Suite 300, Portsmouth, NH 03801

Vice Chairman: Robert J. Greene

Address: 1000 Market Street, Bldg. 1, Suite 300, Portsmouth, NH 03801

Director: \_\_\_\_\_

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

Director: \_\_\_\_\_

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

**B. OFFICERS**

President: David Akridge

Address: 1000 Market Street, Bldg. 1, Suite 300, Portsmouth, NH 03801

Vice President: Robert J. Greene

Address: 1000 Market Street, Building 1, Suite 300, Portsmouth, NH 03801

1000 Market Street, Building 1, Suite 300, Portsmouth, NH 03801

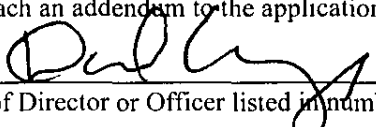
Secretary: \_\_\_\_\_

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

Treasurer: \_\_\_\_\_

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

**NOTE:** If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Director or Officer listed in number 12 of the application)

14. David Akridge  
(Typed or printed name and capacity of person signing application)

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PORTSMOUTH, NH

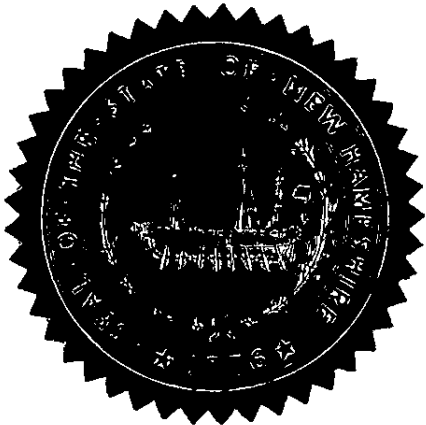
# State of New Hampshire

## Department of State

### CERTIFICATE

I, William M. Gardner, Secretary of State of the State of New Hampshire, do hereby certify that CELEBRATIONS INNKEEPERS, INC. is a New Hampshire corporation duly incorporated under the laws of the State of New Hampshire on September 8, 2010. I further certify that all fees required by the Secretary of State's office have been paid and that articles of dissolution have not been filed.

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA



In TESTIMONY WHEREOF, I hereto  
set my hand and cause to be affixed  
the Seal of the State of New Hampshire,  
this 8<sup>th</sup> day of September, A.D. 2010.

A handwritten signature in cursive script, appearing to read "William M. Gardner".

William M. Gardner  
Secretary of State