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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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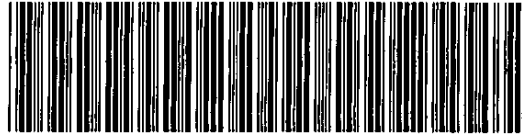
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 MAY 24 PM 1:16

Lana Wilken  
409 E. Henschen Avenue  
Oakland, FL 34760  
407-287-7326

May 21, 2007

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

Re: Creative Rooms Orlando, LLC,  
a Florida Limited Liability Company

Dear Sir or Madam,

Enclosed for filing are the following:

1. Original and one (1) copy of the Articles of Organization for Creative Rooms Orlando, LLC, a Florida Limited Liability Company; and
2. Check in the amount of \$155.00 representing filing fees and a certified copy of the Articles of Organization.

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DIVISION OF CORPORATIONS  
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Please return all correspondence concerning this matter to the following:

Lana Wilken  
409 E. Henschen Avenue  
Oakland, FL 34760

A self-addressed, stamped envelope is enclosed for your convenience.

Should there be any questions regarding this filing, please call me at 407-287-7326.

Very truly yours,



Lana Wilken

LW:ll  
Enclosures

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

CREATIVE ROOMS ORLANDO, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

#### Principal Office Address:

409 E. Henschen Avenue  
Oakland, FL 34760

#### Mailing Address:

P.O. Box 1115  
Oakland, FL 34760-1115

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

LANA WILKEN

Name

409 E. Henschen Avenue

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

Oakland FL 34760

City, State, and Zip

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*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..*

  
Registered Agent's Signature (REQUIRED)

(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

"MGRM" = Managing Member

**Name and Address:**

MGR

Lana Wilken

409 E. Henschen Avenue

Oakland, FL 34760

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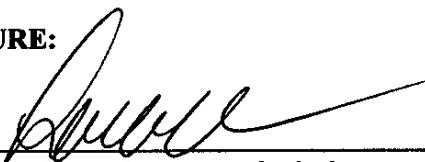
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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ **(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:**



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.)

LANA WILKEN

Typed or printed name of signee

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DIVISION OF CORPORATIONS

**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)**