## L090000000000008

(Requestor's Name)					
(Address)					
(Address)					
( iddioss)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					

Special Instructions to Filing Officer:

A. LUNT

JUL -1 2009

**EXAMINER** 

Office Use Only



800157046558

06/12/09--01068--010 \*\*35.00

SECRETARY OF STATE

FILED



## FLORIDA DEPARTMENT OF STATE Division of Corporations

June 15, 2009

CAMILLE A. ARSENAULT 1420 CELEBRATION BLVD. SUITE 200 CELEBRATION, FL 34747

SUBJECT: CELEBRATION WORLD PROPERTIES LLC

Ref. Number: L09000022458



We have received your document for CELEBRATION WORLD PROPERTIES LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 409A00020159







June 30, 2009

Bpgs incl. This one

Ms. Agnes Lunt Regulatory Specialist II Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. FL 32301

RE: Ref. Number: L09000022458

Letter Number 409A00020152

VIA FACSIMILE: 850-245-4030

Dear Ms. Lunt:

We are in receipt of your letter dated June 15<sup>th</sup> citing the reference number above. Enclosed please find the corrected forms per your request.

Initially, we submitted TWO separate filing requests:

1. Signed Member Resignation

mille around 18

Signed Articles of Amendment/Organization

Each submission included a \$35.00 money order to process. We verified via telephone that these money orders were retained by the Department for the purpose of processing the corrected submissions. However, the corrected submissions indicate a \$25.00 fee is due for each. Will you forward a refund for each overpayment? Please advise.

Thank you in advance for your prompt attention to this matter. Should you have any questions, please do not hesitate to contact me via telephone and/or email as noted on my cover sheet being submitted.

Sincerely.

Camille Arsenault

1420 Celebration Boulevard, Suite 200 Celebration, Florida 34747

## **COVER LETTER**

TO: Amendment Section
Division of Corporations



NAME OF CORPO	AME OF CORPORATION: Celebration World Properties LLC					
DOCUMENT NUM	BER:	L09000022458				
The enclosed Article	s of Amendment and fee	are submitted for filing.				
Please return all corre	espondence concerning th	is matter to the following:				
	Camille A. Arsenault					
	1	Name of Contact Person				
	tion World Properties LLC					
Firm/ Company						
_	1420 Celebration Boulevard, Suite 200  Address					
	Ce	elebration, FL 34747				
***************************************	(	City/ State and Zip Code				
		•				
<del></del>	E-mail address: (to be use	ed for future annual report notification)				
For firther information	on concerning this matter,	nlegse call·				
•	_	•				
Can	nille Arsenault	at ( 315 ) 383-8955  Area Code & Daytime Telephone Number				
Name of	Contact Person	Area Code & Daytime Telephone Number				
Enclosed is a check f	or the following amount r	nade payable to the Florida Department of State:				
<b> </b>	\$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & ☐ \$52.50 Filing Fee Certified Copy (Additional copy is enclosed)  Certified Copy (Additional Copy is enclosed)	nclosed)			
Mailing Add	ress	Street Address				
Amendment Section		Amendment Section				
Division of Corporations		Division of Corporations				
P.O. Box 6327		Clifton Building				
Tallahassee, FL 32314		2661 Executive Center Circle				

Tallahassee, FL 32301

14072954387

P.03

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited L.	lability Compar lorida Limited L	ODERLT ES L ny agit now appears on a lability Company)	ur recorda.)	_		
The Articles of Organization for this Limited List Florida document number <u>L090000</u> 22	oility Company 2458	were filed on3/4	2/2009 an	d assigned		
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t		·,		,		
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ted Liability Company," ti	he designation "LLC res	the Doreviation		
Enter new principal offices address, if applicable:		nla	H A S			
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	SEE			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		n/A	TLORIDA	C		
B. If amending the registered agent and/or registered agent and/or the new registered officers.	registered of ce address her	fice address on our re	ecords, onter the nai	ms of the new		
Name of New Registered Agent:	nia		· · · · · · · · · · · · · · · · · · ·	·····		
New Registered Office Address:						
·	Emer Florida street address					
		Clly		Code		
New Registered Agent's Signature, if changing Re-	elstored Agent:					
I hereby accept the appointment as registered the provisions of all statutes relative to the pro- accept the obligations of my position as registe being filed to merely reflect a change in the re- company has been notified in writing of this ch	per and complered agent as p gistered office lange.	lete performance of my provided for in Chapter	duties, and I am fam r 608, F.S. Or, if this Arm that the limited li	lliar with and document is ability		

JUH-26-2009 09:16 AM

MGR - Manager

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager

KAREN BRYON

or Managing Member being added or removed from our records:

Title	Name	Address	Type of Action
M6Q_	JOHN H. WHITE	1420 CELEBRATION BUSINAMI TELEBRATION FL 34745	Add Romove
hgrn	PAIK BYON	1420 CREBRATION BOXENING SULE DEN CREBATION AL 34747	Add Remove
<u>mgrm</u>	JEANELLE COLLET	NAO CRESEATION BOULDIAND LUTE 2010 CELEBRATION FL 34747	Adá Remove
•			Add Remove
			□Add □Remove
<del>,</del>			Add Remove
D. Ifamend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)	_
<del></del>			
Dated 6	Canul I (h	eraul	
	Signature of a member	er or authorized representative of a member  RABULF  d or printed name of signee	<del></del>

Page 2 of 2

Filing Fee: \$25.00