(Requestor's Name)
(Address)
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COVER LETTER

TO:	Registration S Division of Co			•	
CUDI	Ecr. Orland	lo Events Group, I	LLC		
SUBJ	EC1:		ed Liability Compa	iny)	
The ci	nclosed Articles o	f Organization and fec(s) are	submitted for filing	3 .	
Please	return all corresp	ondence concerning this mat	ter to the following	; :	
	Dana Brov	vn			
			(Name of Person)		
	Red Top F	Productions, Inc.			
			(Firm/Company)		
	8062 S. C	adiz Court			
			(Address)		
	Orlando, F	FL 32836			
		(Cit	y/State and Zip Code	;)	
For fu	rther information	concerning this matter, please	e call:		
Dar	na Brown		at (321	202-585	
	(Name	of Person)	(Area Code	e & Daytime Tel	ephone Number)
Enclo	sed is a check for	or the following amount:			
\$125	5.00 Filing Fee	✓\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address ion Section of Corporations tuilding ecutive Center Coce, FL 32301	s

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compa	any is:
Orlando Events Group, LLC	
	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
8062 S. Cadiz Court	8062 S. Cadiz Court
Orlando, FL 32836	Orlando, FL 32836
ARTICLE III - Registered Agent, Regi	stered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.)	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of	stered Office, & Registered Agent's Signature: rn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Joanne C. Gran	stered Office, & Registered Agent's Signature: rn Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Regi (The Limited Liability Company cannot serve as its ow business entity with an active Florida registration.) The name and the Florida street address of Joanne C. Gran	stered Office, & Registered Agent's Signature: In Registered Agent. You must designate an individual or another of the registered agent are: t Name Sara Circle reet address (P.O. Box NOT acceptable)

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 SECRETARY OF STATE

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Mitchell A. Anderson
	260 S. Osceola Avenue, #1005
	Orlando, FL 32801
MGRM	Dana L. Brown
	8062 S. Cadiz Court
	Orlando, FL 32836
MGRM	Joanne C. Grant
	1243 Lake Willisara Circle
	Orlando, FL 32806
	
(Use attachment if necessary)	
LE V: Effective date, if other than	the date of filing: (OPTION
Tective date is listed, the date mu	ist be specific and cannot be more than five business da
days after the date of filing.)	

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.)

Mitchell A. Anderson

Typed or printed name of signee

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)