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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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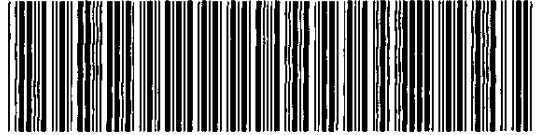
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

T. CLINE

APR 27 2009

EXAMINER

LAW OFFICES
EIZEN FINEBURG & McCARTHY
A PROFESSIONAL CORPORATION

TWO COMMERCE SQUARE
34TH FLOOR
2001 MARKET STREET
PHILADELPHIA, PENNSYLVANIA 19103

1040 Kings Highway
Suite 500
Cherry Hill, NJ 08034
Tel (856) 773-0945
Fax (856) 773-0309

TEL (215) 751-9666
FAX (215) 751-9310
website: www.efm.net

The Homer Building, Suite 390 South
601 Thirteenth Street, NW
Washington, D.C. 20005
Tel (202) 347-1917
Fax (202) 347-8344

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April 23, 2009

Via Federal Express – Tracking #8614 3506 4629

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

Re: Celebration Ventures, LLC

Dear Sir/Madam:

Enclosed please find an original and one copy of the Articles of Organization for the above-referenced entity. In addition, please find our firm's check in the amount of \$155.00 representing the required filing fee and requested certified copy.

Kindly file the original and return a certified copy to me in the self-addressed, stamped envelope provided.

Thank you.

Very truly yours,

Eve Thomas, Paralegal

ET/dei

Enclosures

cc: Bernard Eizen, Esquire (w/o encl.)

JAROBERTS\4-23-09 letter filing Articles of Organization for Celebration Ventures, LLC.doc

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CELEBRATION VENTURES, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eve Thomas, Paralegal

(Name of Person)

Eizen Fineburg & McCarthy, PC

(Firm/Company)

2001 Market Street, 34th Floor

(Address)

Philadelphia

PA

19103

(City/State and Zip Code)

For further information concerning this matter, please call:

Eve Thomas, Paralegal

(Name of Person)

at (215) 751-9666

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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

Street/Courier Address

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

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Celebration Ventures, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

713 Eastlawn Drive
Celebration, FL 34747

Mailing Address:

713 Eastlawn Drive
Celebration, FL 34747

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:

Bernard Eizen

Name

713 Eastlawn Drive

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

Celebration FL 34747

City, State, and Zip

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.

Bernard Eizen

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

Bernard Eizen

713 Eastlawn Drive

Celebration, FL 34747

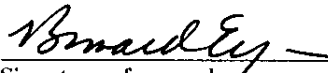
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(Use attachment if necessary)

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.)

Bernard Eizen, Authorized Representative

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)