

L11000058290

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H11000133668 3)))



H110001336683ABC\$

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : CSH SERVICES, LLC  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (561) 455-9885

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 MAY 17 AM 8:57

RECEIVED  
11 MAY 17 PM 1:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.  
CHARACTERS WHO PARTY LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

N. Culligan MAY 18 2011

P.2  
FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAY 17 AM 8:17

**ARTICLES OF ORGANIZATION FOR A  
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608 and/or 621, F.S.

**ARTICLE I NAME**

The name of the Limited Liability Company is:

CHARACTERS WHO PARTY LLC

**ARTICLE II ADDRESS**

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

7360 ZURICH CIR

LAKE WORTH, FLORIDA 33467

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT SIGNATURE**

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

SARAH LEVINE

7360 ZURICH CIR

LAKE WORTH, FLORIDA 33467

Having been named as registered agent 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.

X 

SARAH LEVINE / Registered Agent's signature

PAGE 2

CHARACTERS WHO PARTY LLC

**ARTICLE IV MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

**ARTICLE V MEMBERS (optional)**

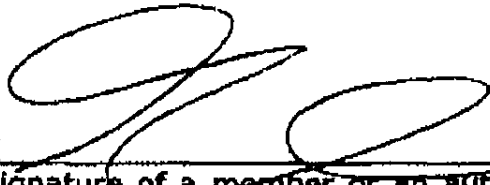
MANAGING MEMBER

SARAH LEVINE

7360 ZURICH CIR

LAKE WORTH, FLORIDA 33467

X

  
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.

SARAH LEVINE

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 MAY 17 AM 8:17