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(Business Entity Name)			
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SECRETARY OF STATE

D. BRUCE

AUG 15 2011

EXAMINER

COVER LETTER

Registration Section
Division of Corporations

TO:

SUBJECT:	CEB REAL ES	TATE HOLDINGS L	LC
BODGECT:		ted Liability Company	
The enclosed Article	s of Organization and fee(s) are	submitted for filing.	
Please return all corre	espondence concerning this mat	ter to the following:	
<u>Jeffrey</u>	Kay		····
		Name of Person	
Jeffrey '	W. Kay, P.C.		
		Firm/Company	
5600 W	. Maple Rd, Suite C	312	
	,	Address	>
West Bloc	omfield, MI 48322		
 		y/State and Zip Code	NS C
<u>j</u> effreywka	ypc@aol.com		SEE 2
	•	for future annual report notification)	
For further information	on concerning this matter, please	e call:	STAT LORI
Jeff Kay		at (248) 737-1858	Dm . -
Nan	ne of Person	Area Code & Daytime Teleph	none Number
Enclosed is a check	for the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	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 Cir Tallahassee, FL 32301	cle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MCEB REAL ESTATE HOLD: (Must end with the words "Limited Liability		
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
6850 Valhalla Way Windermere, FL 34786	6850 Valhalla Way Windermere, FL 34786	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature:	
The name and the Florida street address of the registered agent are:		
Michael Berrin		
Name Co		
Name 6850 Valhalla Way		
Florida street addre	ess (P.O. Box NOT acceptable)	
Windermere	_{FL} 34786	
City, State	e, 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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Michael Berrin 6850 Valhalla Way Windermere, FL 34786 (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 of an authorized representative of a member. (In accordance with section 608.408(3), Horida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) constitutes a third degree felony as provided for in s.817.155, F.S.) Michael Berrin 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)