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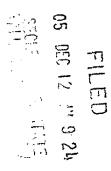
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(City/State/Zip/Phone #)				
PICK-UP	TIAW [	MAIL		
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# **COVER LETTER**

CELEBRATIONS ARE US, INC.

(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:

Enclosed are an original and one (1) copy of the ar	ticles of incorporation and	d a check for:
Still at Dapt- of State	\$78.75 Filing Fee & Certified Copy  ADDITIONAL CO	& Certificate of Status
FROM: Michala L. Lowg Name Celabrations 320 S. FLA	e (Printed or typed)  Ane us, 1  n; ngo Road	NC. BUY 279

NOTE: Please provide the original and one copy of the articles.

PLMB NOKE PINNE FC. 32968 City, State & Zio

954 - 260 - 3650

Daytime Telephone number



### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

October 24, 2005

CELEBRATION, INC. 3RD MAILING 320 S. FLAMINGO RD. SUITE 229 PEMBROKE PINES, FL 33025

SUBJECT: CELEBRATION, INC. Ref. Number: W05000044819

We have received your document for CELEBRATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

#### Adding "of Florida" or "Florida" to the end of a name is not acceptable.

The purpose contained in your articles of incorporation should be more specific. Please correct your articles to reflect the specific purpose for which the corporation is being organized.

Please make sure you want to file a non-profit corporation. This corporation sounds like a profit corporation.

Please return the original and one copy of 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) 245-6047.

Carolyn Lewis
Document Specialist
NEW FILINGS

Letter Number: 905A00059183



## FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

OS DEC 12 DE 4:00
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INDES

October 18, 2005

CELEBRATION, INC. 320 S. FLAMINGO RD. SUITE 229

PEMBROKE PINES, FL 33025

SUBJECT: CELEBRATION, INC. Ref. Number: W05000044819

We have received your document for CELEBRATION, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

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Carolyn Lewis Document Specialist New Filings Section

Letter Number: 905A00059183

<b>F</b> ,	ARTICLES OF INCORPORATION In compliance with Chapter 607 and/or Chapter 621, F.S. (Profit)	•
	ARTICLE I NAME  The name of the corporation shall be:	FILED
	CELEBRATION TIME, INC.	05 DEC 12 AM 9: 24
		- 260,66年407 マー・
	ARTICLE II PRINCIPAL OFFICE  The principal place of business/mailing address is:	TALLAHASSEE, FLORIDA
	320 S. FLAMINGO Road BOX 224	
	Pembroke Pinn, FL. 33025	
	ARTICLE III PURPOSE  The purpose for which the corporation is organized is:	
	The purpose for which the corporation is organized is:  5 A / c of day good products on a  6 4 5 is us will as consulting ser  PARTNEAShips and conponentiale  ARTICLE IV SHARES	wholesale and retail view to dbaa,
	The number of shares of stock is: /000	
•	ARTICLE V INITIAL OFFICERS AND/OR DIRECTOR List name(s), address(es) and specific title(s):  RicHARD Domptowshi President and Tra  michale L. Congrabian via Prasida  320 S. Francingo Road Box 229  Prans roke Piner, Fl. 33025	- career
	ARTICLE VI REGISTERED AGENT	
	The name and Florida street address (P.O. Box NOT acceptable) o	f the registered agent is:
	Michela L. Congerbarne	
	320 S. FLAMING. ROAL BOX 229	
	Pambroke Pinner Fc. 33025	
	APTICLE VII INCORPORATOR	
	The name and address of the Incorporator is:	use dust and Treasure
	The name and address of the Incorporator is:  Michele L. LONGEN BIAM - VICE P.  320 5. FLAMINGO ROAD BOX 229  PENBROKE PINCE, FL. 33025  ***********************************	
	Penbloke 1, NA, FE. 330 AS	***********
	Having been named as registered agent to accept service of process for the above certificate, I am familiar with and accept the appointment as registered agent and	e stated corporation at the place designated in this
	Michel J. Jongerbeum Signature/Registered Agent	15/7/05 Date
		Date
	michele L. Jongerbean	12/7/05 Date
	Signature/Incorporator	Date