SCL/CD-541 (Rev. 10/17)				
MIC	HIGAN DEPARTMENT OF RPORATIONS, SECURITI	LICENSING AND R ES & COMMERCIAI	REGULATORY AFFAIR L LICENSING BUREA	<b>สร</b> บ
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MAR 0 1 2019	This document is effective on th subsequent effective date within date is stated in the document.	ne date filed, unless a n 90 days after received		291-1 02/28/19 :: \$10.00
Name Haithem K. Sarafa				FILED
Address 21 East Long Lake Road	Suite 200			_
City Bloomfield Hills	State Michigan	ZIP Code 48304	EXPIRATION DATE: DECEMBER 31, 202り	MAR 08 2019
Document will be	e returned to the name and address yo locument will be returned to the regist	ou enter above.	cc	ADMINISTRATOR PORATIONS DIVISIONS
ollowing Certificate:  1. The name of the c Christmas Celebrat	orporation, limited partnership, or ion	r limited liability company	/ is:	
2. The identification r	number assigned by the Bureau i	s: 800	0835122	
The assumed nam     Payitbehindyou.con	ne under which business is to be	transacted is:		
4. This document is I	nereby signed as required by the	Act.		
COMF	PLETE ITEM 5 ON PAGE 3 IF TH	HIS NAME IS ASSUMED	) BY MORE THAN ONE E	NTITY.
Siç	ned this 23rd day of	February	2019	
Ву	Haithem K. Soroj	(Signature)		
Ha	ithem K. Sarafa	(Oignature)	President	
	(Type or Print Name)	2	(Type or Print Title or Capacity)	



DEPARTMENT OF THE TREAS

INTERNAL REVENUE SERVICE DISTRICT DIRECTOR P. O. BOX 2508 CINCINNATI, OH 45201

Date: JUN 0 5 1996

CHRISTMAS CELEBRATION C/O HAITHEM K. SARAFA P. O. BOX 130713 ANN ARBOR, MI 48113-0713 Employer Identification Number: 38-3000351

OLN:

315097026

Contact Person:

D. A. DOWNING

Contact Telephone Number:

(513) 684-3957

Our Letter Dated:

November 20, 1991

Addendum Applies:

No

Dear Applicant:

This modifies our letter of the above date in which we stated that you would be treated as an organization that is not a private foundation until the expiration of your advance ruling period.

Your exempt status under section 501(a) of the Internal Revenue Code as organization described in section 501(c)(3) is still in effect. Based on the information you submitted, we have determined that you are not a private foundation within the meaning of section 509(a) of the Code because you are a organization of the type described in section 509(a)(1) and 170(b)(1)(A)(vi).

Grantors and contributors may rely on this determination unless the aternal Revenue Service publishes notice to the contrary. However, if you to section 509(a)(1) status, a grantor or contributor may not rely on this determination if he or she was in part responsible for, or was aware of, the act or failure to act, or the substantial or material change on the part the organization that resulted in your loss of such status, or if he or she would no longer be classified as a section 509(a)(1) organization.

If we have indicated in the heading of this letter that an addendum applies, the addendum enclosed is an integral part of this letter.

Because this letter could help resolve any questions about your private foundation status, please keep it in your permanent records.

If you have any questions, please contact the person whose name and telephone number are shown above.

Sincerely yours.

District Director

BCS/CD-541 (Rev. 04/11)							
MICHIG	AN DEPARTMENT OF LICENSING AND	REGULATORY AFFAIRS					
BUREAU OF COMMERCIAL SERVICES							
ate Received (FOR BUREAU USE ONLY)							
MAR 0 2 2012	This document is effective on the date filed, unle a subsequent effective date within 90 days afte received date is stated in the document.						
Name Haithem K. S	arafa	BUREAL OF COMMERCIAL SERVICES					
Address 31898 Bristo							
<sup>City</sup> Farmington Hills	State Zip Code Michigan 48334	EXPIRATION DATE- DECEMBER 31, 2017					
Document will be returned by the second seco	rned to the name and address you enter at nent will be mailed to the registered office.	pove. <sub>g</sub>					
Pursuant to the particular (nonprofit corporation)	(Please read information and provisions of Act 284, Public Acts of 1972), Act 213, Public Acts of 1982 (limited p	erships and Limited Liability Companies					
	corporation, limited partnership, or limited						
F	NAME OF THE OWNER OWNER OF THE OWNER OW						
2. The identification r	number assigned by the Bureau is:	755200					
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COMPLE	TE ITEM 5 ON LAST PAGE IF THIS N	IAME IS ASSUMED BY MORE THAN ONE ENTITY.					
	28th Eah	2012					

Signed this 28th day of February 2012

By Harthan K. Savafa President/Director

(Type or Print Name) (Type or Print Title or Capacity)

(Limited Partnerships Only - Indicate Name of General Partner if the General Partner is a corporation or other entity)

Print New Search

The name of the DOMESTIC NONPROFIT CORPORATION: CHRISTMAS CELEBRATION

**Identification Number:** 800835122 **Old ID Number:** 755200

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MICHIGAN'S OKTOBIERFEST	3/5/2012	12/18/2017	12/31/2022	
PAYITBEHINDYOU.COM	3/8/2019		12/31/2024	

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