0000 orida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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.

(((H00000037565 9)))

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

To:

ATTY NO. 015

CLIENT NO. 015222

MATTER NO. 75283

Division of Corporations

Fax Number : (850)922-4003

From: GAIL S. ANDRE'

Account Name

: LOWNDES, DROSDICK, DOSTER, KANTOR & REE Account Number: 072720000036

Phone : (407)843-4600

Fax Number : (407)843-4444
PLEASE ARRANGE FILING OF THE ARTICLES OF ORGANIZATION WITH AN EFFECTIVE DATE OF TODAY, JULY 18, 2000, AND RETURN TO ME A CERTIFICATION AS SOON AS COSSIBLE. THANK YOU FOR YOUR ASSISTANCE IN THIS MATTER.

LIMITED LIABILITY COMPANY

MERRIGAN & CASSIDY LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

Electropic Filing Menu

Corporate Filing

Public Access Help

ARTICLES OF ORGANIZATION

OF

MERRIGAN & CASSIDY LLC

ARTICLE I - NAME

The name of this limited liability company is MERRIGAN & CASSIDY LLC (the "Company").

ARTICLE II - PRINCIPAL OFFICE

The mailing address and street address of the principal office of the Company is C.McR. Records, 28 Moles Worth Street, Dublin 2, Ireland.

ARTICLE III - INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of the Company is 215 N. Eola Drive, Orlando, Florida 32801 and the name of the initial registered agent of the Company at that address is Michael Ryan.

Signature of an Authorized Representative of a Member

Michael Ryan

Typed or Printed Name of Signer

ACCEPTANCE OF REGISTERED AGENT

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, Florida Statutes.

Michael Ryan