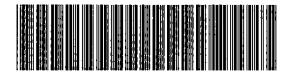
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SECRETARY OF STATE

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C. LEWIS

AUG 2 5 2011

EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: S. Catherine Tyrrell, LLC		
Name of Limited Liability Company		
The enclosed Articles of Organization and fee(s) are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Sarah Catherine Tyrrell		
Name of Person		
S. Catherine Tyrrell, LLC		
Firm/Company		
6717 NW 26th Terrace		
Address		
Gainesville, FL 32653		
Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Sarah Catherine Tyrrell Name of Person S. Catherine Tyrrell, LLC Firm/Company 6717 NW 26th Terrace Address Gainesville, FL 32653 City/State and Zip Code gainesvillecathy@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: S. Catherine Tyrrell Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: 125.00 Filing Fee Certificate of Status Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Sirreet/Courier Address Registration Section Division of Corporations Clifton Building Clifton Building Clifton Building Clifton Building 2661 Executive Center Circle		
S. Catherine Tyrrell at (352) 281-2514		
Name of Person Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount:		
Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy		
Registration Section Division of Corporations P.O. Box 6327 Registration Section Division of Corporations Clifton Building		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	::
S. Catherine Tyrrell, LLC	
(Must end with the words "Limited Liab	oility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the particle.	orincipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
Gainesville, FL 32653	Gainesville, FL 32653
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	istered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
S. Catherine Tyrrell	ARY SS
Name	SEE T
6717 NW 26th T	
Florida street ac	ddress (P.O. Box NOT acceptable)
Gainesville,	_{FL} 32653

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..

City, State, and Zip

(CONTINUED)

	ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:		FILED	
]	<u>`itle:</u>	Name and Address:	2011 AUG 24	門 12:3
	MGR" = Manager MGRM" = Managing Member		SECRETARY JALLAHASSE	OF STATE
N	IGRM	S. Catherine Tyrrell		
		6717 NW 26th Terrace		
		Gainesville, FL 32653		
_				
_				
(Use attachment if necessary)			
f an eff or 90 c	ective date is listed, the date mo lays after the date of filing.)	n the date of filing: August 22, 2011 ust be specific and cannot be more than five		
<u>F</u>	REQUIRED SIGNATURE:			
		ach fores		
	Signature of a m	ember or an authorized representative of a mem	ber.	
	constitutes an affirmation I am aware that any false	on 608.408(3), Florida Statutes, the execution of this under the penalties of perjury that the facts stated h information submitted in a document to the Department of the penalties of period in s.817.155, F.S.)	erein are true.	
		S. Catherine Tyrrell		
		Typed or printed name of signee		

- 11-44

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)