

L13000017492

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

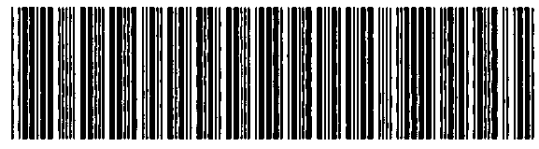
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

FEB -4 2013
G. McLEOD



300244078653

01/31/13--01023--016 **130.00

FILED
13 JAN 31 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: KATE MCKEON, 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:

CHARLES H. BURNS, ESQ.

Name of Person

Firm/Company

1061 E. INDIANTOWN ROAD, SUITE 400

Address

JUPITER, FL 33477

City/State and Zip Code

KATENYC5@AOL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CHARLES H. BURNS

Name of Person

at (**561**) **747-2600**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & 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 Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I
Name

The name of the Limited Liability Company is:

KATE MCKEON, LLC

ARTICLE II
Address

The mailing address and street address of the principal office of the Limited Liability Company is:

717 U.S. Highway One, Apt. 204
Jupiter, Florida 33477

ARTICLE III
Registered Agent, Registered Office and Registered Agent's Signature

The name and the Florida street address of the Registered Agent are:

Charles H. Burns, Esq.
1061 E. Indiantown Road, Suite 400
Jupiter, Florida 33477

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.



CHARLES H. BURNS, ESQ.
Registered Agent's Signature

13 JAN 31 PM 12:14
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV

Management

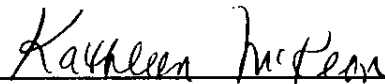
Check box if applicable

The name and address of each Manager or Managing Member is as follows:

MGRM

Kathleen McKeon
717 U.S. Highway One, Apt. 204
Jupiter, Florida 33477

The Limited Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.



Signature of a member or an authorized representative of a member

In accordance with Section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Kathleen McKeon

Typed or printed name of signee