

L05000031185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

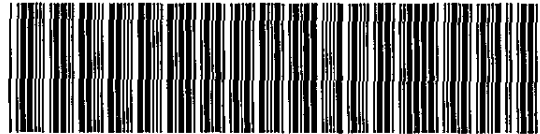
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FILED
05 MAR 30 PM 4:28
SECURITY OF STATE
TALLAHASSEE FLORIDA

RECEIVED
05 MAR 30 PM 3:00
TALLAHASSEE FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 286806 4303593

AUTHORIZATION :

Patricia Pizante

COST LIMIT : \$ 125.00

FILED
05 MAR 30 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 30, 2005

ORDER TIME : 2:16 PM

ORDER NO. : 286806-005

CUSTOMER NO: 4303593

CUSTOMER: Ms. Lee Anderson
Levett Rockwood P.c.

33 Riverside Avenue

Westport, CT 06880

DOMESTIC FILING

NAME: TRW SALES, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: _____

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

FILED
05 MAR 30 PM 4:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

TRN Sales, LLC

ARTICLE II - Address:

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

Principal Office Address:

8464 Abington Circle #1922

Naples, FL 34108

Mailing Address:

46 Whiffle Tree Lane

Suite No. 2

New Canaan, CT 06840

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Thomas R. Wise II

Name

8464 Abington Circle #1922

Florida street address (P.O. Box **NOT** acceptable)

Naples, FLORIDA 34108

City, State, and Zip

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.

✓ Thomas R. Wise II
Registered Agent's Signature

Thomas R. Wise II

Page 1 of 2
(CONTINUED)

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

"MGRM" = Managing Member

Naples, FL 34108

NOTE: An additional article must be added if an effective date is requested.

✓ Thomas L. Wain II

(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.)

Typed or printed name of signee

§ 5.00 Certificate of Status (Optional)