# L06000008508

(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



600063848086

01/25/06--01012--005 \*\*)55.00

FILED FILE

2006 JAN S AH 9: 4 V S JAN 25 12 S 2006 JAN 25 1

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

# CAPITAL CONNECTION, INC.

**417** E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Trebor Toronto, LLC	TALLAHASSEE, FLOAT
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: 1/25 9:00	UCC 1 or 3 File
Name Date Time	UCC 11 Search
Valk-In Will Pick Un	UCC 11 Retrieval
ANALES III ANILE A	L'OUPLOY

#### **ARTICLES OF ORGANIZATION**

OF

# TREBOR TORONTO, LLC



Each undersigned individual, being either a member or the authorized representative of a member, hereby presents these Articles of Organization to the Department of State of the State of Florida in accordance with Chapter 608, Florida Statutes, for the formation of a limited liability company under the laws of the State of Florida.

#### ARTICLE I

The name of the limited liability company (the "Company") is:

# TREBOR TORONTO, LLC

#### **ARTICLE II**

Unless and until the Company is dissolved by the unanimous consent of the members or by law, the Company will exist in perpetuity from the date of the filing of these Articles with the Florida Department of State.

#### **ARTICLE III**

The mailing address and street address of the Company's principal business office is:

Northbridge Centre 515 North Flagler Drive Suite 808 West Palm Beach, Florida 33401

#### **ARTICLE IV**

The name of the initial registered agent and the street address of the initial registered office for service of process in the State of Florida are as follows. Attached to these Articles is a written statement from the registered agent as required by Florida Statute § 608.415.

Registered Agent

Address of Registered Office

Harold L. Lewis

One Biscayne Tower, Suite 2400 2 South Biscayne Boulevard Miami, Florida 33131

#### **ARTICLE V**

The business of the Company shall be managed by one or more members. The Company shall be a member-managed Company. The initial managing member will be:

ROBERT CUILLO
Northbridge Centre
515 North Flagler Drive
Suite 808
West Palm Beach, Florida 33401

#### **ARTICLE VI**

The Company may exercise any powers, without limitation whatsoever, which a limited liability company may legally exercise under the laws of the State of Florida.

#### **ARTICLE VII**

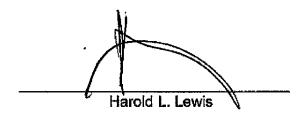
The Company may indemnify any manager, member, officer, employee or agent of the Company to the fullest extent permitted by Florida law.

IN WITNESS WHEREOF, the undersigned authorized representative of the Company has hereunto executed these Articles of Organization this 20<sup>th</sup> day of January 2006.

Harold L. Lewis, Authorized Representative

# **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.



r:\cuillo robert\cuillo robert - friends of menopause\trs\(-) trebor toronto art org - llc.doc