

L99000002879

Sunstate Research

Requestor's Name

Address

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Torsad Partners, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in ☐ Pick up time _____ ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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99 MAY 19 PM 1:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input checked="" type="checkbox"/> | NonProfit |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|--|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/ Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

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-05/19/99--01033--002
****337.50 ****337.50

| Name | 5/19/99 |
|------------------|-------------------|
| Availability | Doc |
| OTHER FILINGS | |
| Document | Annual Report DOC |
| Examiner | |
| Fictitious Name | DOC |
| Updater | |
| Name Reservation | |
| Updater | |
| Verifier | DOC |
| Acknowledgement | DOC |
| W. P. Verifier | DOC |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

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61 MAY 19 AM 11:19
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DIVISION OF CORPORATIONS
SECRETARY OF STATE

L99000002879

Examiner's Initials

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

ARTICLE I - Name

The name of the Limited Liability Company is Torsad Partners, LLC.

ARTICLE II - Address

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

c/o gr
Shutts & Bowen LLP
201 South Biscayne Boulevard
1600 Miami Center
Miami, Florida 33131

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ARTICLE III - Duration

The period of duration for the Limited Liability Company is to be perpetual.

ARTICLE IV - Management

The Limited Liability Company is to be managed by its directors (who will constitute the Limited Liability Company's managers for all purposes of the Florida Limited Liability Company Act) . The names and addresses of the initial directors are:

William D. Belhumeur

447 Orange Street
Apartment 42
Oakland, California 94610

Stuart F. Hamlyn

911 Union Street
San Francisco, California 94133

ARTICLE V - Registered Agent and Office

The name of the initial registered agent of the Limited Liability Company is:

Corporation Company of Miami
201 South Biscayne Boulevard
11600 Miami Center
Miami, Florida 33131

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ARTICLE VI - Miscellaneous

The right of the members to admit additional members and the terms and conditions of the admissions, and the right of the remaining members to continue the business upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or upon the occurrence of any other event which terminates the continued membership of a member, will be governed by the Limited Liability Company's Operating Agreement (which, as amended from time to time, will constitute its Regulations for all purposes of the Florida Limited Liability Company Act).



William D. Belhumeur, Member

REGISTERED AGENT ACCEPTANCE

Having been named to accept service of process for the above stated limited liability company at the address designated in this certificate pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned corporation hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete discharge of its duties.

Date: May 17th, 1999

CORPORATION COMPANY OF MIAMI

By: 
LALAINÉ A. LANDAU, ASSISTANT SECRETARY

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of the member of **TORSAD PARTNERS, LLC** says:

- 1) the above named limited liability company has at least one member;
- 2) the total amount of cash contributed by the members is \$2,000;
- 3) if any, the agreed value of property other than cash contributed by the member is \$-0-;
- 4) the total amount of cash or property anticipated to be contributed by the members is \$2,000. This total includes amounts from 2 and 3 above.



William D. Belhumeur, Member

Signature of a member or authorized representative of a member
(in accordance with section 608.407(2), Florida Statutes,
the execution of this affidavit constitutes an affirmation under
the penalties of perjury that the facts stated herein are true.)

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