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(Requestor's Name)

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(Business Entity Name)

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100125456781

04/25/08--01036--005 **1052.50

RECEIVED

08 APR 25 PM 12:52

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

08 MAY -2 PM 3:34

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAY 2 2008

EXAMINER

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 04-25-08

NAME: UNIQUE STAFF LEASING I LTD

TYPE OF FILING: APPLICATION FOR FOREIGN LP

COST: CK FOR \$1052.50 ATTACHED

RETURN: CERTIFIED COPY

ACCOUNT: ~~FCA0000000015~~

AUTHORIZATION: ~~ABBIE/PAUL HODGE~~

FILED
08 MAY -2 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 25, 2008

FLORIDA FILING & SEARCH

TALLAHASSEE, FL

SUBJECT: UNIQUE STAFF LEASING I, LTD.
Ref. Number: W08000021081

FILED
08 MAY -2 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for UNIQUE STAFF LEASING I, LTD. and your check(s) totaling \$1052.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$1,052.50 payment.

Before these limited partnership documents can be filed, the general partner -- UNIQUE STAFF LEASING, LLC -- must be registered in Florida.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 608A00025288

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR
LIMITED LIABILITY LIMITED PARTNERSHIP
TO TRANSACT BUSINESS IN FLORIDA

FILED
08 MAY -2 PM 3:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. UNIQUE STAFF LEASING I, LTD.

(Name of Limited Partnership or Limited Liability Limited Partnership, which must include suffix)
Acceptable Limited Partnership suffixes: Limited Partnership, Limited, L.P., LP, or Ltd.
Acceptable Limited Liability Limited Partnership suffixes: Limited Liability Limited Partnership, L.L.L.P.
or LLLP.

(If name unavailable, name under which the limited partnership or limited liability limited partnership
proposes to register to transact business in Florida; must contain acceptable suffix.)

2. TEXAS

(State or Country of Formation)

3. 4/4/2000

(Date of Formation)

4. REGISTERED AGENT SOLUTIONS, INC.

(Name of Registered Agent for Service of Process)

5. 155 OFFICE PLAZA DR, SUITE A

(Florida street address for Registered Agent)

TALLAHASSEE FL 32301

6. 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 relative to the proper and complete performance of my duties,
and I am familiar with and accept the obligations of my position as registered agent.


Signature of Registered Agent

7. 4646 CORONA, SUITE 105

(Principal office address)

CORPUS CRISTI, TX 78411

8. If limited partnership is a limited liability limited partnership, check box ☐

9. 4646 CORONA, SUITE 105

(Mailing address)

CORPUS CRISTI, TX 78411

10. Name, principal office address, and mailing address of each general partner:

UNIQUE STAFF LEASING, LLC

(Name)

M0800V00209V

4646 CORONA, SUITE 105

(Street Address)

CORPUS CRISTI, TX 78411

4646 CORONA, SUITE 105

(Mailing Address)

CORPUS CRISTI, TX 78411

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

(Name)

(Street Address)

(Mailing Address)

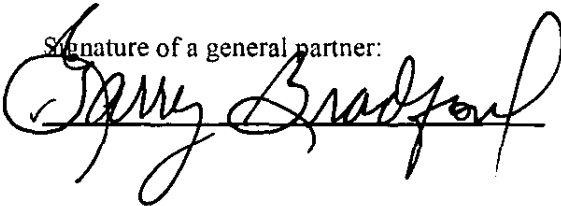
11. Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

12. Attached is a certificate of existence duly authenticated, not more than 90 days prior to the delivery of this application to the Florida Department of State, by the Secretary of State or other official having custody of the entity's records in the jurisdiction under the law of which it is organized.

Signed this 21 day of April, 2008.

Signature of a general partner:



Filing Fees:	\$1,000.00 (\$965 Filing Fee and \$35 Registered Agent Fee)
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

Corporations Section
P.O.Box 13697
Austin, Texas 78711-3697



Phil Wilson
Secretary of State

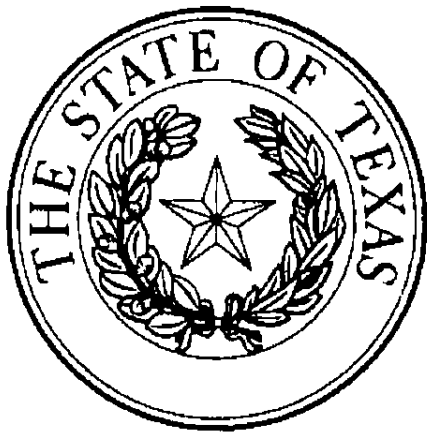
Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate Of Limited Partnership for UNIQUE STAFF LEASING I, LTD. (file number 13335410), a Domestic Limited Partnership (LP), was filed in this office on April 04, 2000.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on April 22, 2008.



A handwritten signature of Phil Wilson in black ink.

Phil Wilson
Secretary of State