2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State
04-30-2003 90184 011 ****50.00

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DOCUMENT # L00000010772

1. Entity Name
UNICO INTERIOR LLC

Principal Place of Business	Mailing Address
14920 SW 43RD ST. MIAMI FL 33185	14920 SW 43RD ST. MIAMI FL 33185

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business		3. Mailing Address	
6905 NW 73 Court		6905 NW 73 Court	
Suite, Apt. #, etc.: Suite 2		Suite, Apt. #, etc.: Suite 2	
City & State: Miami, Florida		City & State: Miami, Florida	
Zip: 33166	Country: USA	Zip: 33166	Country: USA

4. FEI Number 65-1045008 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

MARTINEZ, PAULO CESAR
14920 SW 43RD ST.
MIAMI FL 33185

7. Name and Address of New Registered Agent

Name: Valencia, Raul A.
Street Address (P.O. Box Number is Not Acceptable): 15629 SW 100 Lane.
City: Miami FL Zip Code: 33196

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE [signature]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Florida Department of State
Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR VALENCIA, RAUL A 15629 S.W. 100TH LANE MIAMI FL 33196	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (10/02)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: [signature] Raul A. Valencia 4/26/03 (305) 805-8885
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #