L02000018504

P/G.CASTILIAN 1258 NW 170 AVE	
Penbroke Pines, FL 33028	

City/State/Zip

Phone #

	Office Use Only	_
CORPORATION NAME(S) & DOCUM	ENT NUMBER(S), (if known):	
1. Unique Milting LC (Corporation Name)	(Document #)	<u></u>
2. (Corporation Name)	(Document#) 8000572 -06/10/02 ****125.	2586 01041010 00 ****125.00
Corporation Name)	(Document #)	
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☐ Walk in ☐ Pick up time ☐ Mail out ☐ Will wait	Certified Copy Photocopy Certificate of S	
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	APPINUALL AND FILED 02 JUL 22 AMII: 35 SECRETARY OF STATE FALLAHASSEE, FLORIC
OTHER FILINGS Annual Report Fictitious Name	REGISTRATION/QUALIFICATION Foreign Limited Partnership Reinstatement Trademark Other	A 1

CR2E031(7/97)

Examiner's Initials



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 11, 2002

R/G. CASTRILLON 1258 NW 170 AVE. PEMBROKE PINES, FL 33028

SUBJECT: UNIQUE PAINTING LLC Ref. Number: W02000016896

We have received your document for UNIQUE PAINTING LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following:

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 002A00038235

PILED

02 JUL 22 AM II: 35

SECRETARY OF STATE
FALLAHASSEE, FI ORDER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is: UNIQUE PAINTING LLC

ARTICLE II - Address:

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

1258 NW 170 AVE PEMBROKE PINES, FL 33028

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

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

GUSTAVO CASTRILLON

Name

1258 NW 170 AVE

Horida street address (P.O. Box NOT acceptable)

PEMBROKE PINES FL 33028

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, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(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.)

CUSTAVO CASTRILLON

Typed or printed name of signee

Fling Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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