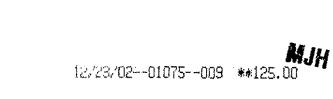
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ARTHANIEL SMITH						
- 540 N.W.77 ST.#30 -						
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_ Miami, FL 33136						
(City/State/Zip/Phone #)						
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# FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 26, 2002

ARTHANIEL SMITH 540 N.W. 7TH ST., #30 MIAMI, FL 33136

SUBJECT: UNIQUE PAINTING AND PRESSURE CLEANING

Ref. Number: W02000035852

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

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

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) 245-6967.

Letter Number: 302A00067401

Michelle Hodges Document Specialist

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	RTI	CLI	$\mathbf{I}$	- Na	ame:

The name of the Limited Liability Company is: UNIQUE PAINTING AND PRESSURE CLEANING!

### **ARTICLE II - Address:**

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

540 N.W. TH ST. #30, MIAMI, FL 33136

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

ARTHANIEL Smith 540 N.W. 7TH ST. # Orthonel Smith
The name and the Florida street address of the registered agent are:

ARTHANIEL SMITH

540 N.W. TH ST. #30

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

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

MIAMI, FL FL 33136

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

(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.)

ARTHANIEL SMITH

Typed or printed name of signee

#### Filing 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)