

L09000112359

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

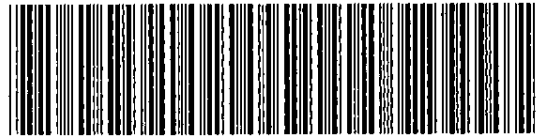
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300162520553

11/23/09--01006--016 *160.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 NOV 23 PM 3:24

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2009 NOV 23 AM 10:47
NOT RETURNED
TO AGENCY OF
SUFFICIENCY OF FILING

B. KOHR
NOV 23 2009
EXAMINER

LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
09 NOV 23 PM 3:24

Office Use Only

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

1. UNIK RESEARCH CONSULTANTS,
(Corporation Name) (Document #)
2. LLC
(Corporation Name) (Document #)
3. _____
(Corporation Name) (Document #)
4. _____
(Corporation Name) (Document #)

- Walk in Pick up time 2.00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

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

OTHER FILINGS

- Annual Report
- Fictitious Name

REGISTRATION/QUALIFICATION

- Foreign
- Limited Partnership
- Reinstatement
- Trademark
- Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited liability Company is:

UNIK RESEARCH CONSULTANTS, LLC

ARTICLE II

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

**366 NE 33 TERR
HOMESTEAD FL. 33033**

ARTICLE III

The purpose for which this Limited Liability is organized is:

ANY AND ALL LAWFUL BUSINESS.

ARTICLE III

The name and Florida street address of the registered agency is:

TAMIAMI AGENCY INTERNATIONAL DOCUMENT CENTER, INC.
701 SW 27 AVE No. 4
MIAMI FL. 33135

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 (REQUIRED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 NOV 23 PM 3:24

ARTICLE V

The name and address of managing members/managers are:

MGR

CARIDAD DANIELS
366 NE 33 TERR
HOMESTEAD FL. 33033

ARTICLE V

The effective date for this Limited Liability Company shall be:
11-16-2009

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



Signature



Typed or printed name of signee