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K. SALY EXAMINER JAN 27 2011

COVER LETTER

TO: . - Registration Section **Division of Corporations SUBJECT: Unique Solutions Property Management** Name of Limited Liability Company The enclosed Articles of Organization and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Susan L. Shaw Name of Person **Unique Solutions Property Management** Firm/Company 4411 Bee Ridge Road - #301 Address Sarasota, FL 34233 City/State and Zip Code shaw.susan@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:

at (941) 735- 5324 Area Code & Daytime Telephone Number Susan Shaw Name of Person

Enclosed is a check for the following amount:

\$160.00 Filing Fee, \$155.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Unique Solutions Property Management, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
3452 Tallywood Circle	4411 Bee Ridge Road - #301	
Sarasota, FL 34237	Sarasota, FL 34233	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	egistered agent are:	
Susan Shaw Name	JAN 26	
3452 Tallywood C	Circle Since	
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
Sarasota	ress (P.O. Box NOT acceptable) FL 34237 To and Zin	
City, Sta	te, 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..

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Membe	r
MGR	Susan Shaw
	3452 Tallywood Circle
	Sarasota, FL 34237
	
	·
(Use attachment if necessary)	
LE V: Effective date, if other the	nan the date of filing: (OPTIONA
	nust be specific and cannot be more than five business day
days after the date of filing.)	
REQUIRED SIGNATURE:	
Que.	sha s. Maes

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Susan L. Shaw

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)