Division of Corporations Electronic Filing Cover Sheet

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(((H15000022532 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994 Fax Number : (305)444-4977

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

FLORIDA LIMITED LIABILITY CO. UNIQUE CARPENTRY, LLC

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|--|---|
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Corporate Filing Menu

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January 29, 2015

FLORIDA DEPARTMENT OF STATE

EXPRESS CORPORATE FILING SERVICE INC

SUBJECT: UNIQUE CARPENTRY, LLC

REF: W15000006220

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is L13000114297 (UNIQUE CARPENTRY LLC).

Pleasegraturn your document, along with a copy of this letter, within 60 days on a our filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton
C Regulatory Specialist III

FAX Aud. #: H15000022532 Letter Number: 715A00001738

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| (Must | and with the words "Lim | sited Liability Company, "L.L.C.," or "LLC.") |
|---|--|--|
| ARTICLE II - Address: The mailing address and stre | et address of the princip | al office of the Limited Liability Company is: |
| Principal Office Address: | • | Mailing Address: |
| 11900 SW 168 STREET | | SAME |
| MIAMI. FL 33177 ARTICLE III - Registered The Limited Liability Comp | any cannot serve as its | ice, & Registered Agont's Signature: Dwn Registered Agent. You must designate an individ |
| MIAMI. FL 33177 ARTICLE III - Registered The Limited Liability Companother business entity with The name and the Florida str | any cannot serve as its of an active Florida registrated address of the regist | ice, & Registered Agent's Signature: Dwn Registered Agent. You must designate an individation.) |
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| MIAMI. FL 33177 ARTICLE III - Registered The Limited Liability Companother business entity with The name and the Florida stress of the CAE | any cannot serve as its of an active Florida registrated address of the regist RIEL HERNANDEZ N NO SW 168 STREET ide street address (P.O. | ice, & Registered Agent's Signature: own Registered Agent. You must designate an individ- ation.) cred agent are: ame |

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page I of Z

SECRETARY OF STATE
ASSCRIPTION OF STATE

| <u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager | Name and Address; |
|---|--|
| AMBR | GABRIEL HERNANDEZ 11900 SW 168 STREET |
| | MIAMI, FL 33177 |
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| effective date is listed, the date must be sp | e of filing: (OPTIONAL) sectfic and cannot be more than five business days prior to or 90 days |
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| CLE V: Effective date, if other than the date effective date is listed, the date must be space of filing.) CLE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a man (In accordance with section 60 constitutes an affirmation under I am aware that any false information of the contraction of the constitutes and affirmation under I am aware that any false information. | ember or an authorized representative of a member. 25.0203 (1) (b), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true. Innation submitted in a document to the Department of State |
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