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FLORIDA LIMITED LIABILITY CO.
UNIQUE CLINICAL TRIALS LLC

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Electronic Filing Menu

Corporate Filing Menu

Help



January 7, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LAZARUS

SUBJECT: UNIQUE CLINICAL TRIALS LLC
REF: W22000001837

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 person designated as registered agent in the document and the person signing as registered agent must be the same.

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Tyrone Scott
Regulatory Specialist II
New Filings Section

FAX Aud. #: H22000006295
Letter Number: 822A00000498

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

Unique Clinical Trials LLC

ARTICLE II - Address:

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

9300 NW 25th St, suite 205

Doral, FL 33172

REC-5 PM 12:54

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: *(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)*

Julio Armando Martinez

9300 NW 25th St suite 205

Doral, FL 33172

ARTICLE IV

The name and title of each person authorized to manage and control the Limited Liability Company: (MGR or AMBR)

Julio Armando Martinez (AMBR)

Required Signatures:

Julio A.

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

In accordance with section 605.0203 (1) (b), 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.

Julio Armando Martinez

Typed or printed name of signee

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 605, F.S..

Julio A.

Registered Agent's Signature (REQUIRED)