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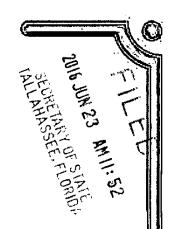
	Registration Section Division of Corporation	ns		
SUBJECT	r: Unique	2 Home B	usiness Ll	
	·	Name of	Limited Liability Compan	у
				Fransact Business in Florida," Certificate of lity company to transact business in Florida
Please retu	urn all correspondence o	concerning this matter to the	following:	
		Adela Me	ndet	
		N	ame of Person	
		F	rm/Company	
	212	7 Brickell A	rve Apt a	104
			Address	
	n	Miami, FL City/s	33129	
		City/S	tate and Zip Code	
	kar	lamendet		
		E-mail address: (to be used	for future annual report n	otification)
For further	information concerning	g this matter, please call:		
_	Adela	Mendet f Contact Person	_at((<u>@</u> 17)	820-2254
	Name o	f Contact Person	Area Code D	aytime Telephone Number
D R P.	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314		Divisio Registr Clifton 2661 E	ET ADDRESS: n of Corporations ation Section Building xecutive Center Circle ssee, FL 32301
	s a check for the followi \$125.00 Filing Fee	ng amount: \$\square\$ \$130.00 \text{ Filing Fee & Certificate of Status}	☐ \$155.00 Filing Fee & Certified Copy	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

Unic	que Home Business, LLC
(Name of F	oreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
If name unavailable, enter iability Company," "L.L.	r alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited .C." or "LLC.")
Nevad	10
(Jurisdiction under the la company is organized)	aw of which foreign limited liability (FEI number, if applicable)
	(Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
8370	NULL Fring Torrage David Fl. 33/66
·	No. of the second secon
	(Street Address of Principal Office)
	83 [
	(Mailing Address)
Name and street addr	(Mailing Address) ress of Florida registered agent: (P.O. Box NOT acceptable)
Name:	Business Filings Incorporated
	range Cruth Diag Island Pand
Office Address:	Plantation, Florida 33324
	(City) , Florida 5352 (Zip code)
is application, I hereb th the provisions of al	eptance; registered agent and to accept service of process for the above stated corporation at the place designated in by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply Il statutes relative to the proper and complete performance of my duties, and I am familiar with and accept osition as registered agent.
e ooiigauons oj my po	Blennot Lutter asst. Secretary (Registered agent's signature)
The name, title or cap	pacity and address of the person(s) who has/have authority to manage is/are:
Adela Ma	endez - Manager - 2127 Brickell Ave. Apt 909, Miami
	33126
	te of existence, no more than 90 days old, duly authenticated by the official having custody of records in the w of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath
the translator must be	
	(Luyono di X
	Signature of an authorized person
is document is execute bruitted in a document	ed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.
	Adela Wlendet
	Typed or printed name of signice

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, UNIQUE HOME BUSINESS, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since May 6, 2016, and is in good standing in this state.

S A EVADA

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on June 9, 2016.

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20160609-1631
You may verify this electronic certificate
online at http://www.nvsos.gov/