1417-000008830

(Red	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

REFERENCE : 871143 4306747

AUTHORIZATION: Smells Remain

COST LIMIT : \$\sqrt{1\frac{1}{5}5\cdot}.00

ORDER DATE: October 17, 2017

ORDER TIME : 11:43 AM

ORDER NO. : 871143-005

CUSTOMER NO: 4306747

FOREIGN FILINGS

NAME: UNIQUE ORIGINALS LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XXX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner -- EXT# 62969

EXAMINER:

COVER LETTER

TO:

	Unique Originale I	1 <i>C</i>				
ECT	Unique Originals L					
		Name of	Limited Liability C	ompany		
		reign Limited Liability Comp ed to register the above refer				
retu	m all correspondence	concerning this matter to the	following:			
	Dawn Short					
	· · · · · · · · · · · · · · · · · · ·	И	ame of Person			
	Honigman Mi	ller Schwartz and Cohn LLP				
	***************************************	F	irm/Company			
	2290 First Nat	ional Building, 660 Woodwa	ard Ave.			
			Address			
	Detroit, MI 48	3226				
		City/S	State and Zip Code			
	dshort@honigm	an.com				
	 	E-mail address: (to be use	d for future annual	report no	tification)	
rther	information concernit	ng this matter, please call:				
D	awn Short		313	465-72	22	
_	Name	of Contact Person	at (Day	time Telephone Number	
	IAILING ADDRESS				ADDRESS:	
	ivision of Corporation egistration Section	S			of Corporations ion Section	
	O. Box 6327			Clifton B		
	allahassee, FL 32314			2661 Exc	ecutive Center Circle See, Fl. 32301	
sed is	s a check for the follow	ving amount;				
	\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	■ \$155.00 Filing Certified Copy	g Fee &	☐ \$160.00 Filing Fee, Cer of Status & Certified Copy	

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

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

(Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to reging (See sections 605 0904 & 605,0905, F.S. to determine page 13550 N.W. 58th Street (Street Address of Principal Office)	itration) enalty liability)	I number, if applicable)
(Date first transacted business in Florida, if prior to regin (See sections 603 0904 & 605,0905, F.S. to determine p 3550 N.W. 58th Street	itration) enalty liability)	I number, if applicable)
(See sections 603 0904 & 605,0905, F.S. to determine p 3550 N.W. 58th Street	enalty liability)	
(See sections 603 0904 & 605,0905, F.S. to determine p 3550 N.W. 58th Street	enalty liability)	
	D () D () 40()	
1	6. P.O. Box 480	g Address)
Miami, FL 33142	Granite Quarry, NC 2	
Name and street address of Florida registered agent: (P.O. Box N	OT acceptable)	
Name: Corporation Service Company		7
Office Address: 1201 Hays Street		
Office Address.		
Tallahassee	Florida 32301	
gistered agent's acceptance:	(7	ap code)
By: (Paristand same's time	ane ben	Asst. Vice Pres
(Registered agent's sign		<u> </u>
		<u> </u>
(Registered agent's sign The name, title or capacity and address of the person(s) who has/h	ave authority to manage is/a	re: Name and Address: Lauren Leichtman
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Name and Address:	ave authority to manage is/a	re: Name and Address:
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130	ave authority to manage is/a	Lauren Leichtman 335 North Maple Dr., Ste 1 Beverly Hills, CA 90210 David Sachs
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210	ave authority to manage is/a Title or Capacity: Manager	Lauren Leichtman 335 North Maple Dr., Stell Beverly Hills, CA 90210
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Manager Aaron Perlmutter 335 North Maple Dr., Ste 130	ave authority to manage is/a Title or Capacity: Manager	Lauren Leichtman 335 North Maple Dr., Ste 1 Beverly Hills, CA 90210 David Sachs P.O. Box 480
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Manager Aaron Perlmutter 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210	ave authority to manage is/a Title or Capacity: Manager Manager	Lauren Leichtman 335 North Maple Dr., Ste Beverly Hills, CA 90210 David Sachs P.O. Box 480 Granite Quarry, NC 28072
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Manager Aaron Perlmutter 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Assert Hills, CA 90210 Assert Hills, CA 90210 Assert Hills, CA 90210 Assert Hills, CA 90210 Attached is a certificate of existence, no more than 90 days old, durisdiction under the law of which it is organized. (If the certificate is	ave authority to manage is/a Title or Capacity: Manager Manager was authenticated by the offici	Lauren Leichtman 335 North Maple Dr., Ste Beverly Hills, CA 90210 David Sachs P.O. Box 480 Granite Quarry, NC 28072
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Manager Aaron Perlmutter 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Jes attachments if necessary) Attached is a certificate of existence, no more than 90 days old, durisdiction under the law of which it is organized. (If the certificate is the translator must be submitted)	ave authority to manage is/a Title or Capacity: Manager Manager y authenticated by the officient a foreign language, a transported to the control of the	Lauren Leichtman 335 North Maple Dr., Ste 1 Beverly Hills, CA 90210 David Sachs P.O. Box 480 Granite Quarry, NC 28072 al having custody of records in the aslation of the certificate under oat
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Manager Aaron Perlmutter 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Astached is a certificate of existence, no more than 90 days old, dulisdiction under the law of which it is organized. (If the certificate is the translator must be submitted) This document is executed in accordance with section 605.0203 (1)	ave authority to manage is/a Title or Capacity: Manager Manager y authenticated by the officion a foreign language, a transportation (b), Florida Statutes, I am	Lauren Leichtman 335 North Maple Dr., Ste 1 Beverly Hills, CA 90210 David Sachs P.O. Box 480 Granite Quarry, NC 28072 al having custody of records in the instation of the certificate under out
The name, title or capacity and address of the person(s) who has/h Title or Capacity: Manager Andrew Schwartz 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210 Manager Aaron Perlmutter 335 North Maple Dr., Ste 130 Beverly Hills, CA 90210	ave authority to manage is/a Title or Capacity: Manager Manager y authenticated by the officion a foreign language, a transportation (b), Florida Statutes, I am	Lauren Leichtman 335 North Maple Dr., Ste 1 Beverly Hills, CA 90210 David Sachs P.O. Box 480 Granite Quarry, NC 28072 al having custody of records in the instation of the certificate under out

Addendum to Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida for Unique Originals LLC

8. The name, title and address of the person(s) who have authority to manage are: (continued)

Title: Manager

Name and Address: Chad Davis, P.O. Box 480, Granite Quarry, NC 28072



I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "UNIQUE ORIGINALS LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE SEVENTEENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "UNIQUE ORIGINALS LLC" WAS FORMED ON THE TENTH DAY OF OCTOBER, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

Authentication: 203409867

Date: 10-17-17

6574166 8300 SR# 20176650800