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To: Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

From: Noah Bell

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-03/03/00--01109--009
****125.00 ****125.00

Dear Sirs,

Attached are the articles of organization for FLORIDA
LLC.

In addition attached are a check for a total of US\$125,
an additional copy which I kindly request to send me
(stamped as "TRUE COPY AS FILED") and an envelope
ready to expedite it.

Please do not hesitate to contact me for any correction/
clarification required, through phones no. (561) 417-7767, (561) 447-68.

Would like to thank you in advance for processing
the registration ASAP.

Sincerely,

Noah Bell
7750 CAGO DEL MAR DR. #710
BOCA RATON
FL 33433
(561) 417-7767

00 MAR -3 PM 3:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVAL
AND
FILED
3800

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ISLATEC Ltd. Co.

ARTICLE II - Address:

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

ISLATEC Ltd. Co.
7040 W. PALMETTO PARK RD. #4-627
BOCA RATON, FL 33433

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

NOAH BELL

Name

7750 LAGO DEL MAR DR. #710

Florida street address (P.O. Box **NOT** acceptable)

BOCA RATON FL 33433

City, State, 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.

Registered Agent's Signature

FEB. 28, 2000

Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. ✓

(An additional article must be added if an effective date is requested)

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

(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.)

Typed or printed name of signee

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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APPROVED
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Effective date : FEB. 28, 2000

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Please call me
to:

Phone:

(561) 417-7767

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TALLAHASSEE, FL 32304