

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)541-3694 Fax Number : (305)541-3770

LIMITED LIABILITY COMPANY

I.F. MULTICULTURAL INTERACTIVE SOLUTIONS, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 1 |
| Page Count | 03 |
| Estimated Charge | \$155.00 |

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

I.F. Multicultural Interactive Solutions, LLC

ARTICLE II - Address:

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

888 Brickell Avenue 6th Floor Miami, Florida 33131

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

| | >- | 5 | |
|--|--------|-----|--|
| The name and the Florida street address of the registered agent are: | | MUL | |
| Xavler Santilian | S E | -2 | |
| Name | 82 | | |
| 888 Brickell Avenue, 8th Floor | . M⊆ | 2 | |
| Florida street address (F.O. Box Not acceptable | | ယ္ | |
| Miami, Florida 33131 | _SS | 24 | |
| 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 Agents Signature

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ARTICLE IV - Management (Check 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)

Infiservice Corp. a Florida Corporation

By:
Signature of a Member of arbauthorized representative of a member

(in Eccontance with section 608.408(3), Ployde Sequinc, the execution of this document constitutes an attimation under the panelics of populy that the facts stated herein are true.)

Xavier Santillan
Typed or printed name of signas

OO JUN-2 PM 3: 24
SECKLIARY OF STAIL

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