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OFFICE USE ONLY (Document #)

LAZ <u>ARUS</u>	CORPORATE	FILING	SERVICE
	(Requestor's Name)		

3320 S.W. 87 AVENUE

(Address)

MIAMI, FLORIDA (305)552-5973

(City, State, Zip)

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE

	OFFICE USE ONLY
CORPORATION NAME(S) &	DOCUMENT NUMBER(S) (if known):
1. ICS INTERNI	ATIONAL CONSULTING SERVICES,
2. LL C. (Conversion Hame)	(Document #)
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
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NonProfit	Resignation of R.A., Officer/Director
Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal Merger
Other	Merger SSR 0 T
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OTHER FILINGS	REGISTRATION/

Annual Report	,,	QUALIFICATION
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Fictitious Name] -	Limited Partnership
Name Reservation		Reinstatement
		Trademark

Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ICS International Consulting Services, LLC.

ARTICLE II - Address:

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

4011 North Meridian Avenue # 36 Miami Beach, FL 33140

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

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

MARIA ANGELICA PAZ

Name

4011 N.Meridian Avenue #36

Florida street address (P.O. Box NOT acceptable)
Miami Beach
FL 33 40

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

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)

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.)

Nancy Grygiel, member rep.
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

APPROVE AND