Electronic Articles of Organization For Florida Limited Liability Company

L18000040230 FILED 8:00 AM February 13, 2018 Sec. Of State jafason

Article I

The name of the Limited Liability Company is: INTERNATIONAL SERVICE PROVIDER LLC

Article II

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

8300 W FLAGLER ST SUITE 254-E MIAMI, FL. US 33144

The mailing address of the Limited Liability Company is:

P O BOX 227126 MIAMI, FL. US 33222

Article III

Other provisions, if any:

IMPORT, EXPORT, INTERNATIONAL COURIER, AND FREIGHT FORWARDING.

Article IV

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

GUILLERMO CASTILLA ROSELL 8300 W FLAGLER ST SUITE 254E MIAMI, FL. 33144

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.

Registered Agent Signature: GUILLERMO CASTILLA ROSELL

Article V

The name and address of person(s) authorized to manage LLC:

Title: MMGR JOHN LELONG 1204 CHEMIN DE L'ESCRIDE BELGENTIER, FR. 83210 FR

Title: MGR

GUILLERMO CASTILLA ROSELL 8300 W FLAGLER ST STE 254E MIAMI, FL. 33144 US

Signature of member or an authorized representative

Electronic Signature: GUILLERMO CASTILLA ROSELL

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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