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EXAMINER

COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---------------|
| SUBJECT: Scisaffle a Delawre limited liability Company | |
| The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida. | |
| Please return all correspondence concerning this matter to the following: | |
| Please return all correspondence concerning this matter to the following: Andrea Zucker ESq. Name of Person Firm/Company | 14.05.08.00 C |
| Firm/Company | • |
| 7492 Malibu Crescut Address | |
| Boca Raton FL 33433 City/State and Zip Code | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Andrea 2 July at 917 453-7822 Name of Person Area Code & Daytime Telephone Number | |
| MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 | |
| Enclosed is a check for the following amount: \$\sigma \sigma \sigma \sigma \sigma \check for the following amount: \$\sigma \sigma \sigm | |

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

| IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: |
|---|
| |
| 1. Selsa TL LC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.") |
| (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C." "LLC.") |
| |
| 2. Jelanase 3. (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) |
| 4. 10 8 10 (Date-of Organization) 5. Per Detrol (Duration: Year limited liability company will cease to exist or "perpetual") |
| |
| (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability) |
| 1 TITL Prancarin Ur Sol |
| 7. Mandar in Dr. Boca Reton FL 33433 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here |
| 8. If limited liability company is a manager-managed company, check here |
| 9. The name and usual business addresses of the managing members or managers are as follows: |
| ISEISA, LLC |
| Selsa, LLC 7111 Mandarin Dr.ve Bora Reton, FL 33433 |
| Boia Raton, FL 33433 |
| 10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.) |
| 11. Nature of business or purposes to be conducted or promoted in Florida: |
| any Izaal purpose. |
| |
| Signature of a member or an authorized representative of a member. |
| (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the |
| penalties of perjury that the facts stated herein are true. I am aware that any 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.) |
| Typed or printed name of signee |
| Typed or printed name of signee |

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

| 1. The name of the Limited Liability Company is: |
|--|
| Iselsa II, LLC |
| If unavailable, the alternate to be used in the state of Florida is: |
| · · · · · · · · · · · · · · · · · · · |
| 2. The name and the Florida street address of the registered agent and office are: |
| Andrea Zucker, Esq. (Name) |
| 7492 Maliw Erescent Florida Street Address (P.O. Box NOT ACCEPTABLE) |
| Boca Raton FL 33433 City/State/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, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

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

DELAWARE, DO HEREBY CERTIFY "ISELSA II, 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 TWELFTH DAY OF OCTOBER, A.D. 2010.

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Jeffrey W. Bullock, Secretary of State

AUTHENTICATION: 8284496

DATE: 10-12-10

You may verify this certificate online at corp.delaware.gov/authver.shtml