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TALLAHASSEE, FLORIDA

T. HAMPTON
AUG 3 0 2011
EXAMINER

110 43557

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ISI Professional Services, LLC
Name of 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:

Grace Smitherman
Name of Person

ISI Professional Services, LLC
Firm/Company

11628 S. Choctaw Dr., Suite 251
Address

Baton Rouge, La 70815
City/State and Zip Code

grace@isips-no.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Grace Smitherman at (225) 273-1222
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:

- ☐ $125.00 Filing Fee
- ☐ $130.00 Filing Fee & Certificate of Status
- ☐ $155.00 Filing Fee & Certified Copy
- ☑ $160.00 Filing Fee, Certificate of Status & Certified Copy

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 AUG 30 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

August 22, 2011

GRACE SMITHERMAN
ISI PROFESSIONAL SERVICES, LLC
11628 S CHOCTAW DR - STE 251
BATON ROUGE, LA 70815

SUBJECT: ISI PROFESSIONAL SERVICES, L.L.C.
Ref. Number: W11000043590

We have received your document for ISI PROFESSIONAL SERVICES, L.L.C. and your check(s) totaling $160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain the name, title, and business address of each managing member or manager who will manage the foreign limited liability company in the state of Florida. Please insert "MGRM" in the title portion for each managing member and "MGR" in the title portion for each manager.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 711A00019597

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. ISI Professional Services, LLC
(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. Baton Rouge, Louisiana
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 72-1511803
(FEI number, if applicable)

4. 10/21/2001 10/22/2001
(Date of Organization)

5. Perpetual
(Duration: Year limited liability company will cease to exist or "perpetual")

6. 08/15/2011
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

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TALLAHASSEE, FLORIDA

7. 11628 S. Choctaw Dr., Suite 251, Baton Rouge, La 70815
(Street Address of Principal Office)

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:
ISI Professional Services, LLC - Pres. Grace Smitherman
11628 S. Choctaw Dr., Suite 251, Baton Rouge, La 70815

1050 17th St., N.W,, Suite 600, Washington, DC 20036

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: Federal Government Contractor

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.)

Grace Smitherman
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:

ISI PROFESSIONAL SERVICES, 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:

DISCOUNT REGISTERED AGENT
(Name)

493 BOUNDARY BLVD
Florida Street Address (P.O. Box **NOT** ACCEPTABLE)

ROTONDA WEST FL 33947
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.

George E. Mitchell
Discount Registered Agent
Account Manager

(Signature)

$ 100.00	**Filing Fee for Application**
$ 25.00	**Designation of Registered Agent**
$ 30.00	**Certified Copy (optional)**
$ 5.00	**Certificate of Status (optional)**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

UNITED STATES OF AMERICA

State of Louisiana

Tom Schedler

SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

ISI PROFESSIONAL SERVICES, L.L.C.

Domiciled at BATON ROUGE, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on October 22, 2001,

I further certify that no Certificate of Dissolution has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

August 11, 2011

Secretary of State

Web 35159792K

STATE OF LOUISIANA · UNION · JUSTICE · CONFIDENCE · SECRETARY OF STATE

Certificate ID: 10192371#2CF52

To validate this certificate, visit the following web site, go to Commercial Division, Certificate Validation, then follow the instructions displayed.
www.sos.louisiana.gov