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(Requestor's Name)				
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PICK-UP	WAIT	MAIL		
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J. BRYAN

OCT 31 2012

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
CHDI	nom Isosani Inc	~		
SUBJ	ECT: Isosani, Inc. (N	ame of Alien Business Organization)		
D				
Dear S	Sir or Madam:			
	aclosed Designation of Registered pmitted for filing.	1 Agent and Registered Office for Alien Business C	Organization and fee(s)
Please	return all correspondence concer	rning this matter to the following:		
Heath	ner Perry			
	· (Name of Person)			
Morai	tis, Cofar, Karney & Moraitis	3	2912 TAL	
	(Firm/Company)		2012 OCT 16 AM 9: 58 SECRETARY OF STATE TALLAHASSEE, FLORIDA	1=
915 N	Middle River Drive, Suite 506		AR 16	
	(Address)			П
			AH 9: 58 EE, FLORIDA	
Fort La	auderdale, FL 33304		SET S	
	(City/State and Zip Coo	de)	DEI 60	
For fur	ther information concerning this	matter, please cail:		
Heath	er Perry	at (954) 563-4163		
	(Name of Person)	(Area Code & Daytime Telephone Number)		
	ET/COURIER ADDRESS:	MAILING ADDRESS:		
	ration Section	Registration Section		
	on of Corporations	Division of Corporations		
	Building Executive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314		
	assee, Florida 32301	rananassee, rionaa 52514		
Enclos	ed is a check for the following	amount:		
✓ \$35.	.00 Filing Fee	\$43.75 Filing Fee & Certified	Сору	

DESIGNATION OF REGISTERED AGENT AND REGISTERED OFFICE FOR ALIEN BUSINESS ORGANIZATION

PURSUANT TO SECTION 607.0505, FLORIDA STATUTES, THE UNDERSIGNED ALIEN BUSINESS ORGANIZATION SUBMITS THE FOLLOWING STATEMENT IN ORDER TO DESIGNATE ITS REGISTERED AGENT AND REGISTERED OFFICE IN THE STATE OF FLORIDA:

1. Isosani, Inc.	
(Name of alien busines	ss organization)
2. Panama	3. n/a
(State or country under which entity is organized)	(FEI Number, if applicable)
. 4240 Calt Ocean Prive Unit 1703 Fort Lauderdele EL	22208
4. 4240 Galt Ocean Drive, Unit 1703, Fort Lauderdale, Fl 3	
5. Name and Florida Street address of registered agent.	TAIL SE
George R. Moraitis, Esquire	1 CR 0 71
915 Middle River Drive, Suite 506	HASS
Fort Lauderdale, FL 33304	1993
6. The street address of the registered office and the street address are identical. 7. (Signature of chairman, vice)	→ A.
8. Mauricio Roberto Restrepo Pinto 91631044	
(Name and capacity of person sig	gning in number 7 above)
9. Signature of registered agent:	
I hereby accept the appointment as registered agent. I an 607.0505, Florida Statutes.	n familiar with and accept the obligations of section
	10/9/12
(Registered agent accepting appointment)	(Date)
THE FILING OF THIS ALIEN BUSINESS ORG	GANIZATION FORM WITH THE FLORIDA

THE FILING OF THIS ALIEN BUSINESS ORGANIZATION FORM WITH THE FLORIDA DEPARTMENT OF STATE DOES NOT AUTHORIZE THE ABOVE REFERENCED ENTITY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

FILING FEE \$35

Make checks payable to Florida Department of State and mail to: Division of Corporations P. O. Box 6327 Tallahassee, FL 32314