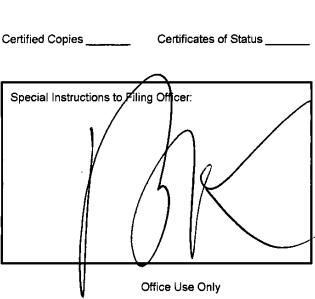
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(I	Requestor's Name)
(/	Address)
(/	Address)
(0	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
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(I	Document Number)
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CORPORATE FILING SERVICE

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MIAMI, FL 33165 (305) 552-5973

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	Office Use Only
ORPORATION NAME(S) & DO	CUMENT NUMBER(S), (if known):
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(Corporation Name)	(Document #)
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11	Certified Copy
Mail out Will_wait -	
NEW FILINGS	AMENDMENTS
Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s: Pregar		
LATIN AMERICA IT (Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is a company in c			
Principal Office Address:	Mailing Address:		
2332 GALIAHO STR	SAME		
CORAL GABLES FL - 33134			
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.)			

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

GALIANO STR 2nd FLOOR
Florida street address (P.O. Box NOT acceptable)

CORAL GABLES FL 33134

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..

ent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: "MGR" = Manager "MGRM" = Managing Member MGRM MARCELO ALEJANDRO GONZALEZ 2332 GRUANO STR 2ND FLOOR FL - 33 134 - COLL GROLES YIVIAHA IRNA IGLESIAS 2332 GRUANO STR 2ND FLOOR COLAR GROLES - FL - 33 134 (Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

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.)

TARCILO ALEJAM DLO GOM ZALEZ
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)