FILED 2002 UNIFORM BUSINESS REPORT (UBR) May 12, 2002 8:00 am Secretary of State DOCUMENT # L01006009909 1. Entity Name TELO INTERNATIONAL, L.L.C. 05-12-2002 90594 043 ****50 00 Principal Place of Business Mailing Address 15853 SW 16TH STREET 15853 SW 16TH STREET 958106 DAVIE FL 33326 DAVIE FL 33326 2. Principal Place of Business 3. Mailing Address 6905 N.W. 6905 N.W. Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Miami Applied For Country Not Applicable Country \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SERRONE, ROBERT A ESQ. Street Address (P.O. Box Number is Not Acceptable) 600 N. PINE ISLAND ROAD NORTH COMMERC SUITE 450 206 PLANTATION FL 33324 8. The above named entity su statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida **SIGNATURE** (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 MANAGING MEMBERS/MANAGERS 10. ADDITIONS/CHANGES TITLE MGRM ☐ Delete TITLE **C**hange ☐ Addition NAME CASTILLO CONSUEGRA, DAGOBERTO A NAME STREET ADDRESS KRA 59 NO. 91-160 STREET ADDRESS CITY-ST-ZIP BARRANQUILLA COLOMBIA CITY-ST-ZIP TITLE **MGRM** ☐ Delete TITLE ☐ Addition NAME BERNAL CASTILLO, SANDRA ISABEL NAME STREET ADDRESS KRA 59 NO. 91-160 STREET ADDRESS CITY-ST-ZIP BARRANQUILLA COLOMBIA CITY-ST-7IP ☐ Delete TITLE Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee employed to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: OPPOS 4110 GOBERTO CASTILLO 04/26/2002 (991/6)-415