LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2003 8:00 am
Secretary of State
03-27-2003 90013 013 ****50.00

DOCUMENT # L02000003775

1. Entity Name

COMBROS, L.L.C.

30046592

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
9130 S. DADELAND BLVD.	9130 S. DADELAND BLVD.
Suite, Apt. #, etc.: SUITE # 1504	Suite, Apt. #, etc.: SUITE # 1504
City & State: MIAMI	City & State: MIAMI
Zip: FLORIDA / Country: 33156	Zip: FLORIDA / Country: 33156

DO NOT WRITE IN THIS SPACE

4. FEI Number: 01-0632107 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name: MARIO GUZMAN

Street Address (P.O. Box Number is Not Acceptable): 9130 S. DADELAND BLVD. SUITE # 1504

City: MIAMI FL Zip Code: 33156

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: MARIO GUZMAN REGISTER AGENT DATE: 3-19-03
Signature, typed or printed name of registered agent and title if applicable.

FEE IS $50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE: MGR NAME: CONESANA, DANIEL STREET ADDRESS: RIO BAMBA 651 - 3 FLOOR. APT. "A" CITY-ST-ZIP: BUENOS AIRES - ARGENTINA.	TITLE: NAME: CONESANA, DANIEL STREET ADDRESS: RIO BAMBA 651 - 3RD FLOOR APT. "A" CITY-ST-ZIP: BUENOS AIRES - ARGENTINA
TITLE: MGR NAME: CONESANA, ALEJANDRO JOSE STREET ADDRESS: ALSINA 2168 APT. "C" CITY-ST-ZIP: BUENOS AIRES - ARGENTINA	TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:
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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 empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DANIEL CONESANA 3/19/03 (305)670 1991
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #