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COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: PROQ	UIBER USA L	LC	
SUBJECT:		ed Liability Company)	·
The enclosed Articles of C	Organization and fee(s) are	submitted for filing.	
Please return all correspon	ndence concerning this matt	ter to the following:	
MARC A.	PFEIFFER		
······································		(Name of Person)	
PROQUIE	BER USA LLC		
		(Firm/Company)	
10800 NV	V 21 ST UNIT	200	
		(Address)	
MIAMI FL	-33172		
	(Cit	y/State and Zip Code)	_
For further information co	ncerning this matter, please	e call:	
MARC A PFE	IFFER	at 305 629991	9
(Name of	Person)	(Area Code & Daytime Tele	phone Number)
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, FL 32301	rcle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	y is:	
PROQUIBER USA LLC	•	
	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	he principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
10800 NW 21 ST UNIT 200	10800 NW 21 St UNIT 200	
MIAMI - FL-33172	MIAMI FL-33172	
(The Limited Liability Company cannot serve as its own I business entity with an active Florida registration.) The name and the Florida street address of the MARC A. PFEI	F0 4	

671 NW 128 CT

Florida street address (P.O. Box NOT acceptable)

MIAMI FL -33182 FL City, State, and 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, F.S..

(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:

	nnager Managing Member	Name and Address:	
MGR		MARC A. PFEIFFER	
		671 NW 128 CT	
		MIAMI FL-33182	
MGRM		HURGIA M. PFEIFFER	
		671 NW 128 CT	
		MIAMI FL-33182	
			
			·
(Use attachm	ent if necessary)		
ICLE V: Effect effective date is 90 days after th	ive date, if other than th	ne date of filing: (be specific and cannot be more than five bu	
ICLE V: Effect effective date is 90 days after th	ive date, if other than the slisted, the date must e date of filing.) SIGNATURE:		isiness days prid
ICLE V: Effect effective date is 90 days after th	ive date, if other than the slisted, the date must be date of filing.) SIGNATURE: Signature of a member (In accordance with s	ber of an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury	siness days prio 08 JAN SECRE TALLAH
ICLE V: Effect effective date is 90 days after th	ive date, if other than the slisted, the date must e date of filing.) SIGNATURE: Signature of a member of this document content that the facts stated MARC A. F	ber of an authorized representative of a member. section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury a herein are true.)	usiness days prid

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)