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THE LAW FIRM OF KIM & LOWMAN, LLP

8620 NE 2 Avenue Miami, Florida 33138 Telephone: 305-981-4477 Facsimile: 305-981-4478

February 15, 2017

VIA FEDEX

Florida Department of State Florida Division of Corporations Apostilles Section P.O. Box 6800 Tallahassee, Florida 32314

RE: Certificates and Apostilles

Dear Division/Department:

I need certified copies of the following documents, and apostilles for each one:

Hidrobo Automotive Group, LLC, Document No. L14000172592

- Certified Articles of Organization (filed 11/05/2014)
- · Certificate of Status
- · Certified Copy of the enclosed Articles of Amendment (to be filed now)

Insight Global Solutions, LLC, Document No. L16000196625

- Certified Articles of Organization (filed 10/25/2016)
- · Certificate of Status

Capital Global Holding, LLC

- Certified Articles of Organization (filed 2/13/2017)
- · Certificate of Status

Please find enclosed a check for the certified copies (\$120) and certificates of status (\$15) in the amount of \$135.00, and a check for the apostilles in the amount of \$70.00, together with the apostille request form.

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SECRETARY SEE. FLORIDA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Hidrobo Automotive Group, LLC			
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appears on our record anbility Company)	<u>(s.)</u>	
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000172592</u>	were filed on 11/05/2014	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
AUTOUNION COMPANY, LLC			
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:		HANSON 2	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		s, enter the name of the nev	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street addre	2.2	
	, FI	, Florida	
New Registered Agent's Signature, if changing Registered Agent:		•	
I hereby accept the appointment as registered agent and agra provisions of all statutes relative to the proper and complete accept the abligations of my position as registered agent as p being filed to merely reflect a change in the registered office	performance of my duties, a provided for in Chapter 605,	nd I am familiar with and F.S. Or, if this document is	

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person-being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	Arturo M. Hidrobo Estrada	41 Madison Avenue, 41st Floor	
		New York, New York 10010	_
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