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Florida Department of State
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Foreign Limited Liability Company
PROVEEDORES ELECTRICOS S.A., LLC

Certificate of Status	0
Certified Copy	0
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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDAIN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:1. PROVEEDORES ELECTRICOS S.A., LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name not reliable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 45-5496833

(FBI number, if applicable)

4. _____

(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. re jurisdictional penalty liability))5. 1427 E. HILLSBORO BLVD., APT 528

(Street Address of Principal Office)

DEERFIELD BEACH, FL 334416. 1427 E. HILLSBORO BLVD., APT 528

(Mailing Address)

DEERFIELD BEACH, FL 334417. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)Name: KATHRYN BARLOWOffice Address: 1427 E. HILLSBORO BLVD., APT 528DEERFIELD BEACH

(City)

, Florida 33441

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with
and accept the obligations of my position as registered agent.Kathryn Barlow
KATHRYN BARLOW (Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:Name and Address:Title or Capacity:Name and Address:MANAGERKATHRYN BARLOW1427 E. Hillsboro Blvd., #528
Deerfield Beach, FL 33441

(Use attachments if necessary)

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the
jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath
of the translator must be submitted)10. This document is executed in accordance with section 605.0203 (1)(b), Florida Statutes. I am aware that any false information
submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.Kathryn Barlow
Signature of an authorized personKATHRYN BARLOW, MANAGER

Typed or printed name of signer

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Delaware

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The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "PROVEEDORES ELECTRICOS S.A., LLC" IS
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE FOURTEENTH DAY OF AUGUST, A.D. 2018.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
PAID TO DATE.



5136424 8300

SR# 20186164795

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBullock", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed.

Authentication: 203244887

Date: 08-14-18

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