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**FLORIDA PROFIT/NON PROFIT CORPORATION  
PETGAR CONSULTING CORP.**

|                       |         |
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| Certificate of Status | 0       |
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Electronic Filing Menu

Corporate Filing Menu

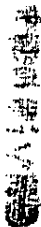
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

12 DEC -7 AM 9:40

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## ARTICLES OF INCORPORATION

The undersigned Incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

### ARTICLE I - NAME

The name of the corporation shall be:

**PETGAR CONSULTING CORP.**

### ARTICLE II - PRINCIPAL OFFICE

The principal place of business and mailing of this corporation shall be:

201 Galen Dr. #116  
Key Biscayne FL 22149

### ARTICLE III - SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is:

100

### ARTICLES IV - INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Eduardo Mendoza  
201 Galen Dr. #116  
Key Biscayne FL 22149

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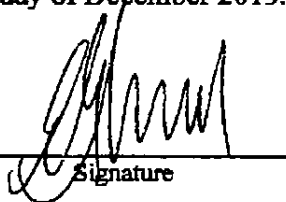
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**ARTICLE V – INCORPORATOR**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The name and address of the incorporator to these Articles of Incorporation is:

**Eduardo Mendoza**  
201 Galen Dr. #116  
Key Biscayne FL. 22149

The undersigned incorporator has executed these Articles of Incorporation this  
11 day of December 2013.

  
\_\_\_\_\_  
Signature**ARTICLE VI- DIRECTOR (S)**

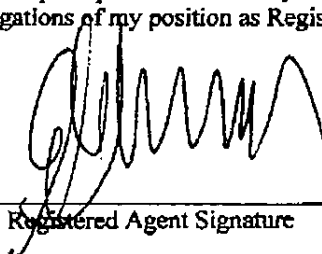
The names and street address of the directors to these Articles of Incorporation  
are:

**Eduardo Mendoza – President**  
**Juan Petisco – Treasurer**

201 Galen Dr. #116  
Key Biscayne FL. 22149

**CERTIFICATE OF DESIGNATION OF REGISTERED AGENT /**  
**REGISTERED OFFICE**

Having been named as Registered Agent and to accept service of process for the above stated corporation at 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 related to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as Registered Agent.

  
\_\_\_\_\_  
Registered Agent Signature

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