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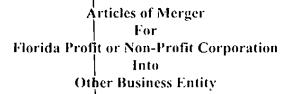
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COVER LETTER

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co	VER LETTER		MIT DCT 2 WAY TO
TO: Amendment Section Division of Corporations			2 2 3
SUBJECT: Andes Asset Management Inc			- K.
Name	e of Surviving Party		-
Please return all correspondence conce	rning this matter to:		
Rebecca Malka			
Contact Person		-	
Andes Asset Management Inc.			
Firm/Company		-	
1200 Brickell Avc, Suite 1950			
Address		-	
Miami, FL 33131			
City, State and Zip Cod	 le	•	
Rmalka@worldcapinv.com			
E-mail address; (to be used for future ann	ual report notification)	•	
For further information concerning this	matter, please call;		
Jennifer Lopez	at (³⁰⁵)961-1698	
Name of Contact Person	Area Code an	d Daytime Telephone Number	er
Certified Copy (optional) \$8.75			
STREET ADDRESS:	MAIL	ING ADDRESS:	
Amendment Section		ment Section	
Division of Corporations		n of Corporations	
Clifton Building	li .	ox 6327	
2661 Executive Center Circle Tallahassee, FL 32301	Tallaha	ssee, FL 32314	





The following Articles of Merger are submitted to merge the following Florida Profit and/or Non-Profit Corporation(s) in accordance with s. 607.1109, 617.0302 or 605.1025, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each <u>merging</u> party are as follows:

<u>Name</u>	<u>Jurisdiction</u>	Form/Entity Type
Andes Management LLC	Delaware	LLC
Andes Asset Management Inc.	Florida	Согр.
SECOND: The exact name, form/er as follows:	tity type, and jurisdiction of	the <u>surviving</u> party are
Name	Jurisdiction	Form/Entity Type
Andes Asset Managment J. N.C.	Florida	Corp.

THIRD: The attached plan of merger was approved by each domestic corporation. limited liability company, partnership and/or limited partnership that is a party to the merger in accordance with the applicable provisions of Chapters 607, 605, 617, and/or 620, Florida Statutes.

FOURTH: The attached plan of merger was approved by each other business entity that is a party to the merger in accordance with the applicable laws of the state, country or jurisdiction under which such other business entity is formed, organized or incorporated.
FIFTH: If other than the date of filing, the effective date of the merger, which cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State:
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
SIXTH: If the surviving party is not formed, organized or incorporated under the laws of Florida, the survivor's principal office address in its home state, country or jurisdiction is as follows:
SEVENTH: If the surviving party is an out-of-state entity, the surviving entity:
a.) Appoints the Florida Secretary of State as its agent for service of process in a proceeding to enforce any obligation or the rights of dissenting shareholders of each domestic corporation that is party to the merger.
b.) Agrees to promptly pay the dissenting shareholders of each domestic corporation that is a party to the merger the amount, if any, to which they are entitled under s. 607.1302, F.S.

EIGHTH: Signature(s) for Each Party:

Typed or Printed Name of Entity/Organization: Name of Individual: Andes Management LLC Gonzalo Lopez Jordan Andes Asset Management Inc Gonzalo Lopez Jordan Corporations: Chairman, Vice Chairman, President or Officer (If no directors selected, signature of incorporator.) Signature of a general partner or authorized person General Partnerships: \$ignatures of all general partners Florida Limited Partnerships: \$ignature of a general partner Non-Florida Limited Partnerships: Limited Liability Companies: Signature of a member or authorized representative \$35.00 Per Party Fees:

Certified Copy (optional):

\$8.75

PLAN OF MERGER

FIRST: The exact name, form/follows:	entity type, and jurisdiction	for each <u>merging</u> party are as
Name	Jurisdiction	Form/Entity Type
Andes Management LLC	Delaware	LLC
Andes Asset Management INC.	Florida	Сотр
SECOND: The exact name, for as follows:	m/entity type, and jurisdiction	on of the <u>surviving</u> party are <u>Form/Entity Type</u>
Andes Asset Managment Inc.	Florida	Corp.
All assets and liabilities of Andes Man	agment LLC are merged into And	es Asset Managment Inc.
 		
(Attac	h additional sheet if necessa	יבי)

FOURTH:	
	the interests, shares, obligations or other interests, shares, obligations or others securities eash or other property is as follows:
N/A.	
	
	
(Attach addit	ional sheet if necessary)
obligations or other securities of each n	the <u>rights to acquire</u> the interests, shares, nerged party into the <u>rights to acquire</u> the interests of the survivor, in whole or in part, into cash or
All rights and obligations of Andes Manageme	nt LLC are acquired by Andes Asset Managment LLC.

(Attach additional sheet if necessary)

	nership is the survivor, the name and business address of each general
partner is as follo	WS:
N/A	
	(Attach additional sheet if necessary)
SIXTH: If a limi	ited liability company is the survivor, the name and business address of
	managing member is as follows:
N/A	
 	
	Character Little and the action
	(Attach additional sheet if necessary)
	6 of 7

	tatements that	t are requ	ired by the laws under which each oth	er
	rmed, organiz	ed, or mo	corporated are as follows:	
N/A				
				
	(Attach	addition	al sheet if necessary)	
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SIGHTH: Other n	rovision if an	v relatin		
atomini. Other pr	ioviaion, ii an		a to the merger are ac tollows:	
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N/A				